

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2002 8:00 am
Secretary of State

07-10-2002 90195 046 ***150.00

DOCUMENT # P01000025670

1. Entity Name
ADVANTAGE BAIL BONDS, INC.

Principal Place of Business

**125 NE 8TH ST #2
 HOMESTEAD FL 33030**

Mailing Address

**P O BOX 901388
 HOMESTEAD FL 33090**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1135663

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KENNETH D LEMOINE, P.A.
 14441 SW 64TH AVE
 MIAMI FL 33158**

Name

Beth MORRIS

Street Address (P.O. Box Number is Not Acceptable)

125 N.E. 8 STREET #2

City

HOMESTEAD

FL

Zip Code

33030

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-8-02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 13, 2002 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PD MORRIS, BETH**
 STREET ADDRESS **125 NE 8TH ST #2**
 CITY-ST-ZIP **HOMESTEAD FL 33030**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **VD BELLIS, TIMOTHY**
 STREET ADDRESS **125 NE 8TH ST #2**
 CITY-ST-ZIP **HOMESTEAD FL 33030**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELIZABETH K MORRIS (305) 247-6890

Date **7-8-02**

Daytime Phone #

CR2E034 (4/02)

Attachment
D#9100025670

Advantage Bail Bonds
P.O. Box 901388
Homestead, FL 33090

June 8, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

~~Attachment~~

~~A 91100025670~~

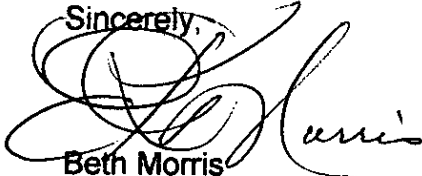
RE: FID#65-1135663
Advantage Bail Bonds

To Whom It May Concern:

Per my conversation this past week with your office, our company did not receive our copy of the Uniform Business Report. We have now received a new copy and are requesting that we be reinstated with the fee of \$150 and that the late fees of \$400.00 be waived. Enclosed is the new copy with the appropriate changes and a check in the amount of \$150.00.

Should you have any questions regarding this, please do not hesitate to contact me at (305) 247-6890.

Sincerely,


Beth Morris