

2002 UNIFORM BUSINESS REPORT (UBR)

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

07-10-2002 90197 026 ***150.00

DOCUMENT # P01000036320

1. Entity Name
MORRIS BAIL BONDS, INC.

Principal Place of Business

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

Mailing Address

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

2. Principal Place of Business

**125 NE 8 STREET
Suite, Apt. #, etc. #2**

3. Mailing Address

**P.O. BOX 901388
Suite, Apt. #, etc.**



DO NOT WRITE IN THIS SPACE

City & State
Homestead FL

City & State
Homestead FL

4. FEI Number

65-1135661

Applied For

Not Applicable

Zip
33030

Country
USA

Zip
33090

Country
USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**KENNETH D. LEMONIE, P.A.
144441 SW 64TH AVE
MIAMI FL 33158**

7. Name and Address of New Registered Agent

Name **Beth MORRIS**

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

125 NE 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 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

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

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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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: **ELIZABETH K. MORRIS (305) 247-6890**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **7-8-02**

Daytime Phone #

CR2E034 (4/02)

Attachment
#P0100036820

Morris 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

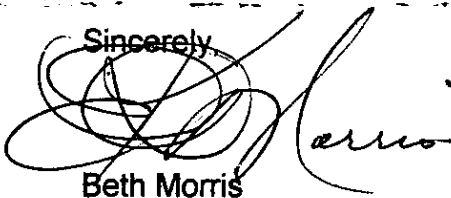
RE: FID#65-1135661
Morris Bail Bonds Inc

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