## 2002 UNIFORM BUSINESS REPORT (UBR)

## Sep 18, 2002 8:00 am Secretary of State P01000037916 DOCUMENT # 1. Entity Name 09-18-2002 90053 026 \*\*\*150.00 TINA'S DESIGNS INC. Principal Place of Business Mailing Address 8228 GULF BLVD. 8228 GULF BLVD. ST. PETE BEACH FL 33706 ST. PETE BEACH FL 33706 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCDONOUGH, TINA M Street Address (P.O. Box Number is Not Acceptable) 8228 GULF BLVD. ST. PETE BEACH FL 33706 City Zip Code 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Addition MCDONOUGH, TINA M NAME NAME 8228 GULF BLVD. STREET ADDRESS STREET ADDRESS ST. PETE BEACH FL 33706 CITY-ST-ZIP CITY-ST-7iP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

727-367-6896

FILED

9/11/02

## TO WHOM IT MAY CONCERN:

I AM WRITING THIS LETTER IN REGARDS TO THE UNIFORM BUSINESS REPORT LATE NOTICE THAT I RECEIVED STATING THAT IT HAD NOT BEEN PAID IN MAY. I WAS NOT AWARE THAT IS WAS DUE. I NEVER RECEIVED ANY THING REGARDING THIS FORM UNTIL THIS LATE ( UBR ) FORM WAS SENT. I SPOKE WITH ONE OF YOUR SERVICE REPRESENTATIVES (ROB) TODAY AND HE SAID TO PAY THE \$150.00 FEE AND ATTACH THIS LETTER INFORMING YOU OF NOT RECEIVING THE UBR FORM BACK IN MAY.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT ME @ 727-367-6896.

THANK YOU,

TINA M: MCDONOUGH

TINA'S DESIGNS INC.

**PRESIDENT** 

PLEASE NOTE THAT ENCLOSED IS A CHECK IN THE AMOUNT OF \$150.00 CHECK #2639.