

# FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # P01000046074

1. Entity Name:

E-Z BABY, INC.



03 DEC 11 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

7200 NW 19th St

3. Mailing Address

14201 Old Cutler Rd.

**REINSTALLMENT 03**

Suite, Apt. #, etc.

Suite #412

Suite, Apt. #, etc.

City & State

City & State

Miami FL 33158

4. FEI Number

65-1101257

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Joseph Lopez

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

250 Birch Rd

City

Coral Gables

FL

Zip Code

33146

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]*

Rick J. Fernandez

11/13/03

(Signature based on printed name of registered agent and held if applicable)

(NOTE: Registered Agent signature required when re-instating)

DATE

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME FERNANDEZ, RICK J  
STREET ADDRESS 14201 Old Cutler Road  
CITY, ST, ZIP Miami FL 33158

TITLE  
NAME  
STREET ADDRESS 400024761704  
CITY, ST, ZIP 11/17/03--01093--015 \*\*150.00

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**DO NOT WRITE  
IN THIS SPACE**

12. 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 a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment when applicable, with all other like empowered.

SIGNATURE:

*[Signature]*

Rick J. Fernandez

11/13/03

305-541-3980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone

CR2E034B (12/02)

October 10, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: E-Z BABY, INC.

~~Doc. Number P01000046074~~

To Whom It May Concern:

This letter is in regards to the corporation annual report for the 2003 filing year. According to your records, you never received an annual report for our corporation. We are sending a filled out blank annual report to your Department because we never received the original report. Please accept our apologies and accept this \$150.00 filing fee. We never meant to send the report late, if we would have received the report, we would have sent it on time. We apologize for any inconvenience this may have caused.

If you have any questions please feel free to contact me at (305) 541-3980.

Sincerely,



Rick J. Fernandez  
President