

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 01, 2002 8:00 am**  
**Secretary of State**

07-01-2002 90354 015 \*\*\*150.00

DOCUMENT # **PO1000046505**

1. Entity Name  
**Suites Away Corporation** ✓

**DO NOT WRITE IN THIS SPACE**

**B0126386**

2. Principal Place of Business  
**115 N.W. 97th Terrace**  
Suite, Apt. #, etc.

3. Mailing Address  
**934 N. University Dr**  
Suite, Apt. #, etc.  
**#417**

DO NOT WRITE IN THIS SPACE

City & State  
**Coral Springs, FL**  
Zip  
**33071**  
Country  
**USA**

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**Coral Springs, FL**  
Zip  
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4. FEI Number  
**65-1102671**  
Applied For  
☐ Not Applicable

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  
**Shands Sublett**  
Street Address (P.O. Box Number is Not Acceptable)  
**115 NW 97th Terrace**  
City  
**Coral Springs FL** Zip Code  
**33071**

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.  
SIGNATURE **Shands Sublett** **Shands Sublett** **6/16/02**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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 <b>President</b>	NAME <b>Shands Sublett</b>
STREET ADDRESS <b>115 NW 97th Terrace</b>	
CITY-ST-ZIP <b>Coral Springs, FL 33071</b>	
TITLE <b>CFO</b>	NAME <b>Richard Sublett</b>
STREET ADDRESS <b>115 NW 97th Terrace</b>	
CITY-ST-ZIP <b>Coral Springs FL 33071</b>	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Shands Sublett** **Shands Sublett** **6/16/02 (954) 346-5666**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Attachment



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

Attachment  
FEI#  
65-1102671  
B0126386

April 29, 2002

SUITES AWAY CORPORATION  
934 N. UNIVERSITY DRIVE  
#417  
CORAL SPRINGS, FL 33071

SUBJECT: SUITES AWAY CORPORATION  
Ref. Number: P01000046585

We have received your document for SUITES AWAY CORPORATION, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$150.00. Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

\*\*\* application was  
→ not enclosed —  
--- Could not download  
local information.

Attachment  
SUITES AWAY

ATTACHMENT  
FEI # 65-1102671

B0126386 "Your Home Suite Home"

(954) 340-5666  
(954) 340-9633 FAX

~~XXXXXXXXXX~~  
CORAL SPRINGS, FL 33071  
E-MAIL: suitesaway@aol.com

TO Florida Dept. of State,  
I did not receive  
the forms to re-estate  
my Florida Corporation.

Here is a check  
for \$150.00 - Please  
sent me the forms.

Suites Away Corporation  
934 n. University Dr. #417  
Coral Springs, Fl.  
33071

TAX ID  
65-1102671