

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 18, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90175 044 \*\*\*150.00

**DOCUMENT # P01000051069**

1. Entity Name

**BEAD CORNER, INC.**

Principal Place of Business

**4004 W NEPTUNE ST. STE 101  
TAMPA FL 33629**

Mailing Address

**4004 W NEPTUNE ST. STE 101  
TAMPA FL 33629**

2. Principal Place of Business

**4004 Neptune  
Suite, Apt. #, etc.  
101**

3. Mailing Address

**4004 Neptune  
Suite, Apt. #, etc.  
Suite 101**

City & State

**TAMPA, FL 33615**

City & State

**TAMPA, FL**

Zip

**33629**

Country

**USA**

Zip

**33629**

Country

**USA**

4. FEI Number

**59-3718267**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**PEREZ, FRANK III  
2703 CLARK RD  
TAMPA FL 33618**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

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.

SIGNATURE

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) ☐

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
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

**President  
LUCY BRAGG  
5818 CRUISEWAY  
TAMPA, FL 33615**

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**President  
KATHLEEN DUTTON  
5818 CRUISEWAY  
TAMPA, FL 33615**

☐ Change ☒ Addition

**Sec/Treas.  
JUDY FLETCHER  
600 5TH AVE N. Safety Harbor FL  
34695**

☐ Change ☒ Addition

**V. President  
PATRICIA RUBENBARGER  
17323 Linda Vista Circle  
TAMPA FL 33548**

☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)