

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90242 023 ***150.00

DOCUMENT # P01000051459

1. Entity Name
SEVEN FROM ONE, INCORPORATED

Principal Place of Business

1145 ROCK ISLAND RD.
MARGATE FL 33063

Mailing Address

1145 ROCK ISLAND RD.
MARGATE FL 33063

2. Principal Place of Business

11800 South Cleveland Ave.

Suite, Apt. #, etc.

3. Mailing Address

11800 South Cleveland Ave.

Suite, Apt. #, etc.

City & State

Fort Myers, FL

City & State

Fort Myers, FL

4. FEI Number

65-1108675

Applied For

Not Applicable

Zip

33907

Country

Lee

Zip

33907

Country

Lee

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRANKLIN, DOROTHY A
1145 ROCK ISLAND RD.
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name

Darrel Franklin

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

11800 South Cleveland Ave.

1

City

Fort Myers

FL

Zip Code

33907

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

Darrel Franklin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/25/2002

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

TITLE	PCEO	<input type="checkbox"/> Delete
NAME	FRANKLIN, DARREL	
STREET ADDRESS	575 BESSEMER SUPER HWY.	
CITY-ST-ZIP	MIDFIELD AL 35228	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRANKLIN, DARREL	
STREET ADDRESS	575 BESSEMER SUPER HWY.	
CITY-ST-ZIP	MIDFIELD AL 35228	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	FRANKLIN, VALLERIE	
STREET ADDRESS	575 BESSEMER SUPER HWY.	
CITY-ST-ZIP	MIDFIELD AL 35228	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FRANKLIN, DAVID	
STREET ADDRESS	6845 LANDINGS DR.	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE	EVD	<input type="checkbox"/> Delete
NAME	FRANKLIN, DOROTHY	
STREET ADDRESS	1145 ROCK ISLAND RD.	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	CENATUS, DEYA A	
STREET ADDRESS	2740 SOMERSET DR.	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33311	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PCEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Franklin, Darrel	
STREET ADDRESS	11800 South Cleveland Ave.	
CITY-ST-ZIP	Fort Myers, FL. 33907	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VTD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Franklin, Vallerie	
STREET ADDRESS	11800 South Cleveland Ave.	
CITY-ST-ZIP	Fort Myers, FL. 33907	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 or without like empowered.

SIGNATURE:

Darrel Franklin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

239-277-2700

Daytime Phone #

CR2E034 (9/01)