

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000066761

1. Entity Name

ESPECIALLY CREATED, INC.

Principal Place of Business

17736 123 TERR. NORTH
JUPITER FL 33478

Mailing Address

17736 123 TERR. NORTH
JUPITER FL 33478

2. Principal Place of Business

17736 123rd Terrace N.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Jupiter

Zip

33478

Country

Palm Beach

City & State

Florida

Zip

Country

4. FEI Number

05-1120215

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZEMAN, STACY

17736 123 TERR. NORTH
JUPITER FL 33478

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)

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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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
STACY ZEMAN
17736 123rd Terrace N.
Jupiter FL 33478

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Michael Zeman
17736 123rd Terrace N.
Jupiter FL 33478

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
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CITY-ST-ZIP

☐ 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)(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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/02

561-741-9525

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-30-2002 91592 016 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (9/01)