2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000086982

1. Entity Name THREE TEES ASSOCIATES, INC.

Principal Place of Business 422 SW 122 AVE

Mailing Address

PEMBROKE PINES FL 33025

422 SW 122 AVE

PEMBROKE PINES FL 33025

2. Principal Place of Business	3. Mailing Adgress 422 Sw 123 AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.



			II.				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State FEMBROKE	Sines FL	City & State PEMBROKE PI	JES /	<i>E</i> 2.	4. FEI Number 65-11388	888	Applied For
		721112101011111			62, 112 01		Not Applicable
Zip 3302 5	Country USA	33025	Country	A	5. Certificate of Status Desire		8.75 Additional ee Required
6. Nar	6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent			
GORDON-COLE, THELMA 422 SW 122 AVE			Name Street Address (P.O. Box Number is Not Acceptable)				
PEMBROKE PINES	FL 33025			City		FI	Zip Code
8. The above named e	ntity submits this statement for	r the purpose of changing its			red agent, or both, in the State of		
,	(And And A			_			

SIGNATURE *

(NOTE: Registered Agent signature required when reinstating)

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

OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME **GORDON -COLE, THELMA** NAME STREET ADDRESS 422 SW 122 AVE STREET ADDRESS PEMBROKE PINES FL 33025 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME COLE, HERMAN NAME STREET ADDRESS 422 SW 122 AVE STREET ADDRESS CITY-ST-7IP PEMBROKE PINES FL 33025 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 trystel 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: 4

THELMA GORDON- COLE 09/09/02
FICER OR DIRECTOR

AdaChment # Polocos 56782 125368782

To Whom It May Concern:

My name is Thelma Gordon-Cole. I am writing on behalf of Herman Cole for Three Tee's Inc. This is our first time filing this Uniform Business Report. We did not receive the first form sent to us but did receive the second for about two months ago.

We are a very small company and do not make a lot of money. We were trying desperately to get the \$550.00. We could not come up with that amount. I am asking you please to accept the original amount of \$150.00. If we had received the initial form that was sent to us, we would have made every effort to return the form with payment at that time. We do apologize for our negligence in addressing this situation sooner. Please help us! Thanking you in advance.

Sincerely.

Thelma Gordon-Cole & Herman Cole

Three Tee's Associates Inc.