

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 08, 2002 8:00 am
Secretary of State

05-08-2002 90100 018 ***150.00

DOCUMENT # P01000097011

1. Entity Name
SONO BABIES, INC.

Principal Place of Business
3274 WEST BUENA VISTA DRIVE
MARGATE FL 33063

Mailing Address
3274 WEST BUENA VISTA DRIVE
MARGATE FL 33063

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1154587

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

WHITCRAFT, MINDY L
3274 W. BUENA VISTA DRIVE
MARGATE FL 33063

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **PT** ☐ Delete
 NAME **WHITCRAFT, MINDY L**
 STREET ADDRESS **3274 W. BUENA VISTA DRIVE**
 CITY-ST-ZIP **MARGATE FL 33063**

TITLE **VS** ☐ Delete
 NAME **POTTER, SHERRY**
 STREET ADDRESS **149 N.W. 41ST WAY**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/02

954-252-5556

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

PO10000097011

To: Florida Department of State
From: Sono Babies, Inc.

Re: Corporate Filing

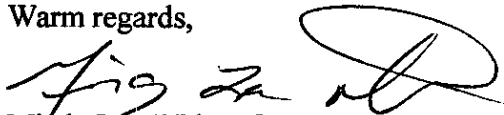
38031

I filed the uniform business report back in May of 2002. I sent in my payment of \$150.00. On May 6, 2002 you cashed my check for \$150.00. I called today to see why I receive a second filing notice. Your department told me that on May 15, 2002 a letter was sent to me explaining that there was no tax I.D. number filled in. I never received this notice. The address that the notice was sent to was not the address of the Corporation, which is the 3274 West Buena Vista Drive, Margate FL. 33063.

Please find enclosed a copy of the cancelled check. Could you please waive the late fee, as I had not received the letter stating that the corporate filing was not complete. If you need to contact me I can be reached at 954-252-5556 ext. 206.

Thank you for your time and consideration on this matter.

Warm regards,



Mindy Lee Whitcraft
Sono Babies

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT.# 1009068706

MAY 06 2012

2099

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MMV 16 22

BANK OF AMERICA, NA, JAX
#063069474 1002 90 P2

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is supported by solidly featured materials
which are not subject to rot.

জন্ম : ১৯৬০ খ্রিঃ

2000

... *you are* ...

2000

1. current appearance of altered

Figure 1. The proposed model of the relationship between the variables. The model is based on the following hypotheses:

7 ANSWER OF THIS QD IS IN EXHIBIT ONE

• **Factorial design** of an experiment is a research design in which each independent variable is manipulated in a separate factor.

சென்னைப் பல்கலைக்கழகம்

www.elsevier.com/locate/jmb

Attachment
PO1000097011

38031

SONO BABIES INC. 3274 W Buena Vista Drive Margate, FL 33063 Ph. 954-421-5140		848033	
		1002	
PAY TO THE ORDER OF		DATE	
<i>Repet of Stacy</i>		<i>4-18-02</i>	
\$		DOLLARS	
<i>One hundred + 61/100ths</i>		<i>150.00</i>	
FOR		Security Features on Back	
<i>Handwritten signature</i>		<input checked="" type="checkbox"/>	
First Union National Bank firstunion.com Orig. 003 R/T 067006432		63-643/670 BRANCH 00222	
⑆001002⑆⑆067006432⑆2000008263562⑆⑆0000075886⑆			