

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 29, 2003 8:00 am**  
**Secretary of State**

04-29-2003 90064 011 \*\*\*150.00

DOCUMENT # P01000104796

1. Entity Name

TUI BUSINESS MACHINES, INC.



Principal Place of Business

563 BEVILLE RD  
S. DAYTONA FL 32119

Mailing Address

8 FAIRGREEN AVE  
NEW SMYRNA BEACH FL 32168

2. Principal Place of Business

2230 HIBISCUS DR

3. Mailing Address

2275 TURNBULL BAY RD

Suite, Apt. #, etc.

SUITE A

Suite, Apt. #, etc.

City & State

EDGEWATER FL

City & State

New Smyrna Beach, FL

Zip

32132

Country

USA

Zip

32168

Country

USA

4. FEI Number

59-3044909

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MCDONALD, DAVID Z  
8 FAIRGREEN AVE  
NEW SMYRNA BEACH FL 32168

7. Name and Address of New Registered Agent

Name

McDONALD, SUSAN P.

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

8 FAIRGREEN AVE 2275 TURNBULL BAY RD

City

NEW SMYRNA Bch FL

City

NSB

FL

Zip Code

32168

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete  
NAME MCDONALD, DAVID Z  
STREET ADDRESS 8 FAIRGREEN AVE  
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☒ Change ☒ Add  
NAME McDONALD, SUSAN, P.  
STREET ADDRESS 2275 TURNBULL BAY RD  
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

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

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, which other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 3, 03

386-427-2603

Date

Daytime Phone #

CR2E034 (10/02)