

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000106387**

1. Entity Name

BABY ON VACATION, INC.

Principal Place of Business

**1200 LAKE BISCAYNE WAY
ORLANDO FL 32824**

Mailing Address

**1200 LAKE BISCAYNE WAY
ORLANDO FL 32824**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

59-3759223

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

**RAPAPORT, MICHELLE S
1200 LAKE BISCAYNE WAY
ORLANDO FL 32824**

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)**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	RAPAPORT, MICHELE S	
STREET ADDRESS	1200 LAKE BISCAYNE WAY	
CITY- ST- ZIP	ORLANDO FL 32824	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE	D	<input type="checkbox"/> Delete
NAME	CLARDY, KRISTIN JEAN	
STREET ADDRESS	12697 MAJORAMA DR.	
CITY- ST- ZIP	ORLANDO FL 32837	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
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 all other like empowered.

SIGNATURE: Michelle Rapaport **5-28-02** **40825644**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #**FILED
Jul 02, 2002 8:00 am
Secretary of State**

06-10-2002 90464 041 ***150.00

07-02-2002 90808 030 ***400.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)

Peter J. Freuler, P.A.

CERTIFIED PUBLIC ACCOUNTANT

231 N. John Young Parkway
Kissimmee, FL 34741
(407) 847-6600
Fax: (407) 847-5921

Attachment

PO 1000106387

May 28, 2002

119021

Florida Department of State

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

Re: Baby on Board
FEI 59-3759223

Dear Sirs:

Please find enclosed a check for \$150.00 for the 2002 Uniform Business Report. The owners were not aware that they needed to reregister with the State of Florida as they initially incorporated their business in October 2001. Please waive the penalty for the 2002 filing. Thank you very much.

Peter J. Freuler, P.A.

Peter J. Freuler, P.A., CPA