

**FOR PROFIT CORPORATION  
UNIFORM-BUSINESS REPORT (UBR)**

132

DOCUMENT # P01000120643

1. Entity Name  
Ms. Bingo Minnie Tours, Inc.

FILED

02 NOV -5 PM 2: 50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1222- 21st Avenue South  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 1415  
Suite, Apt. #, etc.

4-17-02 90103 041 150.00  
DO NOT WRITE IN THIS SPACE

City & State  
St. Petersburg FL  
Zip 33705 Country USA

City & State  
St. Petersburg, FL  
Zip 33731 Country USA

4. FEI Number  
Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Minnie S. Killen

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

1222- 21st Avenue South

City St. Petersburg **FL** Zip Code 33705

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) ☒

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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	NAME	STREET ADDRESS	CITY-ST-ZIP
P/T/D	Minnie S. Killen	1222- 21st Avenue South	St. Petersburg, FL 33705
V/S	Tatiana Killen	1222- 21st Avenue South	St. Petersburg, FL 33705

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Minnie S. Killen  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02  
Date

Daytime Phone #

232

Ms. Minnie Killen  
Ms. BingoMinnie Tours, Inc.  
P.O. Box 1415  
St. Petersburg, Florida 33731

October 31, 2002

Uniform Business Report  
Division of Corporation  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

To Whom It May Concern

Re: Letter of Explanation

Please see attached copy of email about forms being returned for corrections. I did not receive the letter requesting corrections to the Uniform Business Report that we submitted in April 2002. I have completed the information requested. Thank you for your assistance.

Sincerely,



Minnie S. Killen, President  
Ms. BingoMinnie Tours, Inc.