

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

08-21-2003 90109 004 ***150.00

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DOCUMENT # P02000089733

1. Entity Name

SUSIEBABE INC.



Principal Place of Business

**4083 FOREST HILL DRIVE
COOPER CITY FL 33026**

Mailing Address

**4083 FOREST HILL DRIVE
COOPER CITY FL 33026**

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

82-0369236

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

7. Name and Address of New Registered Agent

NECKLES, SUSAN

**4083 FOREST HILL DRIVE
COOPER CITY FL 33026**

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

Susan Neckles

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Susan Neckles
President
4083 Forest Hill Dr.
Cooper City FL 33026

☐ Delete

TITLE
NAME
STREET ADDRESS
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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, with all other like empowered.

SIGNATURE:

Susan Neckles

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

981-317-8808

CR2E034 (4/03)

Attachment #

86139597

DO2000089733

A Father/Daughter Team



Ray Kedzerski

Sue Neckles

July 14, 2003

To Whom It May Concern:

I am the President of Susiebabie Inc. I just received this notice on Friday, July 11, 2003. This was my first notice received. The Corporation was just formed last year. I am not familiar with the procedures. I am enclosing my check for \$150.00 as instructed. I was unable to do so on line due to the late notice. Please accept my apologies for any inconvenience.

If you have any questions or concerns, please contact me at 954-347-8208.

Thank you for your cooperation.

Sincerely,

Sue Neckles

Sue Neckles, President