

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2003 8:00 am**  
**Secretary of State**

08-04-2003 90153 021 \*\*\*150.00

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AV

**DOCUMENT #** P02000119708

1. Entity Name

TELE ONE CORP.



Principal Place of Business  
19380 COLLINS AVENUE  
SUITE 526  
SUNNY ISLES BEACH FL 33160

Mailing Address  
19380 COLLINS AVENUE  
SUITE 526  
SUNNY ISLES BEACH FL 33160



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

57-1138182

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

CHACON, DOLLY  
19380 COLLINS AVENUE  
SUITE 526  
SUNNY ISLES BEACH FL 33160

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

**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  
P  
CHACON, DOLLY  
19380 COLLINS AVENUE  
SUNNY ISLES BEACH FL 33160

☐ Delete

TITLE  
NAME  
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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:** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-31-03 3053034676

CR2E034 (4/03)

Attachment



80135920  
PO200 0119708

July 28, 2003

**Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500**

Re: 2003 For Profit Uniform Business Report  
TELEONE Corp.  
Document #: PO200119708

Dear Sir or Madam:

Please be advised that the above stated corporation did not receive a prior notification that it needed to file a 2003 uniform Business Report. The corporation was not incorporated until November 2003 and perhaps that is why we never received the initial notification. For the above stated reasons, we hereby request that the Department of State waive the additional \$ 400.00 late fee for not filing before May 1, 2003.

If you have any further questions please do not hesitate to contact me.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'Dolly Chacon', written over a horizontal line.

Dolly Chacon  
President  
**TELEONE Corp.**