

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90095 006 ***150.00

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DOCUMENT # P02000127932

1. Entity Name

PTA OF FLORIDA, INC.



Principal Place of Business
3501 INVERRARY BOULEVARD
SUITE 115
FORT LAUDERDALE FL 33319

Mailing Address
3501 INVERRARY BOULEVARD
SUITE 115
FORT LAUDERDALE FL 33319



2. Principal Place of Business

972 AZURE LANE

3. Mailing Address

972 AZURE LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON, FL

City & State

WESTON

4. FEI Number

113668212

Applied For

Not Applicable

Zip
33326

Country
USA

Zip
FL 33326

Country
USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MESA, MANUEL A ESQ.
44 WEST FLAGLER STREET
SUITE 1575
MIAMI FL 33130

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HEESCH, MAUREEN J
3501 INVERRARY BLVD. #115
FORT LAUDERDALE FL 33319

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
M
GUIZAR, NICOLAS
3501 INVERRARY BLVD. #115
FORT LAUDERDALE FL 33319

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAUREEN, HEESCH.
972 AZURE LANE
WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
M.
GUIZAR, NICOLAS
972 AZURE LANE
WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80140495
#PD2000127932



PERFORMANCE
TENNIS ACADEMY

August 21, 2003

Florida Department of State
Division of Corporations
2003 uniform Business Report

Gentlemen,

Please find herewith the Uniform Business Report with our check for \$150.00. Your form was sent to our old address although a change of address was made January 2003.

We kindly request you waive the penalty charges since we just received the form in our new address.

Thank you for assistance in this matter.

Sincerely yours,

Maureen Heesch
Director PTA

972 Azure Lane
Weston, FL 33326

Phone 954 8889259
Fax 954 3497142
ptaitf@aol.com