

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

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90171 037 ***158.75

DOCUMENT # *P06000022451*

1. Entity Name

Syndicate, Inc.



DO NOT WRITE IN THIS SPACE

14020464

2. Principal Place of Business

1943 NE 148th St.

3. Mailing Address

1943 NE 148th St.

City & State

North Miami, FL

City & State

North Miami, FL

Zip

33181

Country

USA

Zip

33181

Country

USA

4. FEI Number

37-1464022

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Trevor C. Henry

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

2707 Jamaica Dr.

City

Miramar

FL

Zip Code

33023

**DO NOT WRITE
IN THIS SPACE**

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

Trevor C. Henry

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	See attachment
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

Trevor C. Henry

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Trevor C. Henry 4/29/04 754-966-2644

Date

Daytime Phone #

CR2E034B (12/02)

Attachment 14020464
OFFICERS & DIRECTORS # P0300002451

1-Trevor C. Henry, SR./ **Director**
2707 JAMAICA DR.
MIRAMAR, FL 330236

2-VERENA T. HENRY/**President**
2707 JAMAICA DR.
MIRAMAR, FL 33023

3-HUBERT E. HENDRICKS / **Chairman**
6242 SW 27TH ST.
MIRAMAR, FL 33023

4-ELVA JARVIS / **Secretary**
2707 JAMAICA DR.
MIRAMAR, FL 33023