

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000092582

1. Entity Name  
TEA TIMEZ INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

37 NOV -7 AM 10:58

Principal Place of Business  
3847 NE 168TH ST., UNIT 3F  
N. MIAMI BCH, FL 33160

Mailing Address  
3847 NE 168TH ST., UNIT 3F  
N. MIAMI BCH, FL 33160



2. Principal Place of Business - No P.O. Box #  
21330 N.E. 26 Ave.

3. Mailing Address  
21330 N.E. 26 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10262007

REIN-P

CR2E098 (1/07)

City & State  
Aventura, FL

City & State  
Aventura, FL

4. FEI Number  
22-3938017

Applied For  
Not Applicable

Zip  
33180

Country  
USA

Zip  
33180

Country  
USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

## 7. Name and Address of New Registered Agent

Name  
HEATHER McVICKER  
Street Address (P.O. Box Number is Not Acceptable)  
21330 N.E. 26 Ave  
City  
Aventura FL Zip Code  
33180

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]*

(NOTE: Registered Agent signature required when reinstating)

10-26-07

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
MCVICKER, HEATHER  
3847 NE 168TH ST., UNIT 3F  
N. MIAMI BCH, FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
HEATHER McVICKER  
21330 N.E. 26 Ave  
Aventura, FL 33180 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
400112084734  
11/07/07--01049--013 \*\*150.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
11/09/07 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
REINSTATEMENT ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-26-07 805/935554