**FILED** 

### **2002 UNIFORM BUSINESS REPORT (UBR)**

### Aug 25, 2002 8:00 am Secretary of State P93000036026 DOCUMENT # 1. Entity Name 08-25-2002 90199 017 \*\*\*150.00 BABE'S, INC. Principal Place of Business Mailing Address 107 KINGS AVE. BRANDON FL 33510 BRANDON FL 33510 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 59-3183496 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PADDOCK, PATRICIA Street Address (P.O. Box Number is Not Acceptable) 107 KINGS AVE. **BRANDON FL 33510** City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition NAME PADDOCK, PATRICIA NAME STREET ADDRESS STREET ADDRESS 107 N. KINGS AVE. CITY-ST-ZIP CITY-ST-ZIP **BRANDON FL 33510** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 7 1 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE

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 be execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

NAME

**SIGNATURE** 

NAME

STREET ADDRESS



# Attachment

## 107 N. Kings Ave. · Brandon, FL 33510 (813) 689-2282

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Fl. 32314

Ref: P93000036026

To Whom It May Concern:

We are disputing the current filing status of document # P93000036026.

Please review Babe's account payment history. We have never neglected a payment. A problem has arisen these past several years with the January billing item not being received at our mailing location. We are unaware of the document being due until we receive a late notice in the summer.

Please research the address being used in January is the same address being used in the summer for our filing fees.

Enclosed is a check for \$150.00, please abate the penalty.

If further information is needed I can be reached at #813-689-9776.

Thank you for your immediate attention in this matter.

Sincerely,

Patricia Paddock, President/Owner