

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State
 04-03-2001 90055 039 ***150.00

DOCUMENT # P93000067417

1. Entity Name
BUYER'S-TEAM, INC.

Principal Place of Business

2323 STICKWAY POINT RD
 SUITE B
 SARASOTA FL 34231
 US

Mailing Address

2323 STICKWAY POINT RD
 SUITE B
 SARASOTA FL 34231
 US

2. Principal Place of Business

2323 STICKNEY POINT RD
 Suite, Apt. #, etc. **SUITE B**
SARASOTA, FL
 City & State

3. Mailing Address

2323 STICKNEY POINT RD.
 Suite, Apt. #, etc. **SUITE B**
SARASOTA, FL
 City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0439425**

Applied For
 Not Applicable

Zip
34231

Country
SARASOTA

Zip
34231

Country
SARASOTA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BARRETT, RALPH
2828 CLARK RD
STE #2
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name **BARRETT, RALPH**
 Street Address (P.O. Box Number is Not Acceptable)
2323 STICKNEY POINT RD.
SUITE B
 City **SARASOTA** FL Zip Code **34231**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BARRETT, RALPH E	
STREET ADDRESS	2828 CLARK RD	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRETT, RALPH E	
STREET ADDRESS	2323 STICKNEY POINT RD	
CITY-ST-ZIP	SUITE B SARASOTA, FL 34231	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ralph E Barrett **RALPH E. BARRETT** 3/25/01 941-925-2136
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0028770

CR2E034 (10/00)