

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000016060

1. Entity Name
PRECIOUS LITTLE PEOPLE, INC.

FILED

01 JUL 25 PM 12:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature/initials

Principal Place of Business
1955 DREW ST
CLEARWATER FL 33765
US

Mailing Address
1955 DREW ST
CLEARWATER FL 33765
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3229553

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHUTRUMP, REBECCA
1955 DREW ST
CLEARWATER FL 33765

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REBECCA SHUTRUMP 1955 DREW ST. CLEARWATER BEACH FL 33765	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

300004543223-5
-08/22/01-01076-008
*****150.00 *****150.00

CR2E034 (10/00)

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:

Rebecca Shutrump
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01 927
4499338
Date Daytime Phone #

We Specialize in
Children, and Everyone
Precious to You



1955 Drew Street
Clearwater, FL. 33765
(727) 449-9338

282

Divisions of Corp.
Uniform Business Report Filings
P.O.Box 1500
Tallahassee, FL 32302-1500

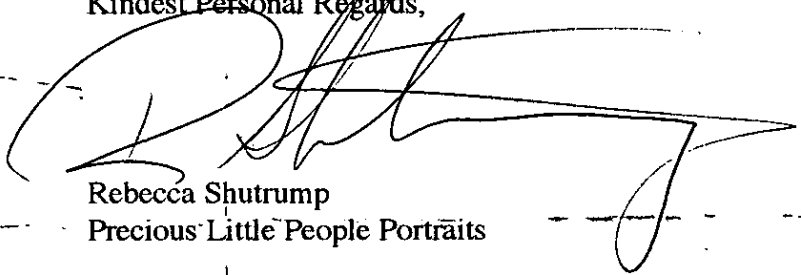
July 19, 2001

Dear Sirs/Madam,

Enclosed please find a check for \$150.00. I was only inform today that my original check was not made out properly and was never cashed. I never received a notice before today, nor have I ever received the original check back.

Someone in your office told me to send in a full explanation, and enclose another check to cover the first one. I hope this does it.

Kindest Personal Regards,



Rebecca Shutrump
Precious Little People Portraits