

FILED
Aug 14, 2002 8:00 am
Secretary of State

07-31-2002 90107 021 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000018684

1. Entity Name

Sweet Sensations, Inc. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

730 W 23rd Street

Suite, Apt. #, etc.

3. Mailing Address

730 W 23rd St

Suite, Apt. #, etc.

City & State

Panama City, FL

City & State

Panama City, FL

Zip

32405

Country

USA

Zip

32405

Country

USA

4. FEI Number

59-3228606

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Janet A. PittsStreet Address (P.O. Box Number Is Not Acceptable)
730 W 23rd StreetCity
Panama City

FL

Zip Code
32405

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 reappointing)

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11.

OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Janet Pitts
4034 Hobbs Lane
Panama City, FL 32409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
William B. Pitts
4034 Hobbs Lane
Panama City, FL 32409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 8, 2002

Daytime Phone #

CP25004B (12/01)

Attachment
Steiner & Company, PA

Certified Public Accountants

Phone (850) 784-0340
Fax (850) 784-4807

41501
1714 West 23rd Street, Suite A
Panama City, Florida 32405

July 22, 2002

Ms. Karon Beyer
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: —Corporation: Sweet-Sensations, Inc.
EIN: 59-3228606
Document #: P94000018684
Form: 2001 Uniform Business Report

Dear Ms Beyer:

Please find enclosed a uniform business report form for the referenced corporation along with a check for the filing fee of \$150.00

This client's corporation was not timely renewed because the original renewal form was not received.

We respectfully request your assistance in processing this renewal and a waiver of the penalty of \$400.00, due to the fact that the referenced corporation did not receive the original uniform business report form timely.

If you have any questions, please advise.

Sincerely,

William B. Steiner

William B. Steiner
Certified Public Accountant