

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P94000056579**

1. Entity Name

**WANDA'S ENTERPRISES, INC.****R****FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90010 035 \*\*\*150.00

Principal Place of Business

**151 NE 210 STREET**  
**MIAMI FL 33179**

Mailing Address

**151 NE 210 STREET**  
**MIAMI FL 33179**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**65-0509239**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**SHEFFIELD, WANDA A.**  
**151 NE 210 ST.**  
**MIAMI FL 33179**

7. Name and Address of New Registered Agent

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 ~~\$550.00~~ / \$750.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>PTSD</b>			
	<b>SHEFFIELD, WANDA A.</b>	<b>151 NE 210 ST</b>	<b>MIAMI FL</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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: **Wanda Sheffield**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment # P94000056579  
7/28/80 DW76939

To Whom It May Concern

Please be advised that I sent  
Check # 2864 for \$150.00 the <sup>5<sup>th</sup></sup> week  
of April 2000. (Dated April 3rd) I  
never checked to see if it cleared,  
but if you would check my record, you  
would see that I always pay my Corporate  
taxes the 1<sup>st</sup> of the month.

According to Leslie (7-28), she explained  
that I should write a letter and send the  
\$150.00.

Thank you  
Mrs. Wanda Sheffield  
305 885-3585 x244 W  
305 651-5578 H