

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000032616

1. Entity Name

T.N.T. INVESTMENTS, INC.

FILED

Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90258 003 ***158.75

Principal Place of Business

1140 LUGO AVE.
CORAL GABLES FL 33156

Mailing Address

1140 LUGO AVE.
CORAL GABLES FL 33156

2. Principal Place of Business

14115 South Dixie Hwy

3. Mailing Address

14115 South Dixie Hwy

Suite, Apt. #, etc.

Suite G

Suite, Apt. #, etc.

Suite G

City & State

Miami FL

City & State

Miami FL

Zip

33176

Country

USA

Zip

33176

Country

USA

4. FEI Number

65-0573281

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEWBERRY, THOMAS J
1140 LUGO AVE.
CORAL GABLES FL 33156

7. Name and Address of New Registered Agent

Name

Thomas J. Newberry

Street Address (P.O. Box Number is Not Acceptable)

14115 South Dixie Hwy, Suite G

City

Miami

FL

Zip Code

33176

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

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

Thomas J. Newberry Pres.

1/29/01

(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 D
NAME NEWBERRY, THOMAS J
STREET ADDRESS 1140 LUGO AVE.
CITY-ST-ZIP CORAL GABLES FL 33156 ☐ Delete

TITLE D
NAME NEWBERRY, MATILDE M
STREET ADDRESS 1140 LUGO AVE.
CITY-ST-ZIP CORAL GABLES FL 33156 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE president
NAME Newberry Thomas J
STREET ADDRESS 224 Tarpon St
CITY-ST-ZIP Tavernier, FL 33070 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

Thomas J. Newberry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-29-01 305
Daytime Phone # 471-2938

U182(196)

CR2E034 (10/00)