

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0096168
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DOCUMENT # **P95000055782**

1. Entity Name
TEE TEE BEE, INC.



FILED
03 JUL 30 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**9266 LAZY LANE
TAMPA FL 33614
US**

Mailing Address
**9266 LAZY LANE
TAMPA FL 33614
US**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0623706**
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**BEAMER, TERRY T
10308 LAKE GROVE DR
ODESSA FL 33556**

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAMER, TERRY T 9266 LAZY LN TAMPA FL 33614 <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"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100022141521 08/08/03--01002--008 **150.00
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

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/03
Date Daytime Phone #

CR2E034 (4/03)

Certa ProPainters®



Attachment

#PQ500055782

9266 Lazy Lane, Tampa, FL 33614

(800) 462-3782 • (813) 936-9242 • Fax 936-9172

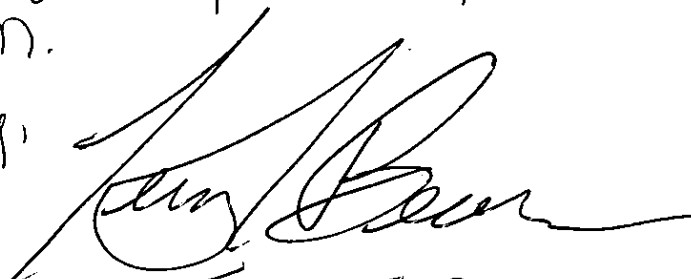
7/22/03

To Whom It May Concern,

I'm writing you this letter to apologize for my mistake in not receiving my renewal fee of \$150.00. I am quite sure that I mailed your statement but forgot to enclose the check. My accountant makes sure every year to inform me that your fee is due May 1st, which I have payed on time every year.

I'm enclosing a check for \$150.00 in hopes that you will forgive my oversite. If you would be so kind to accept my check of \$150.00 without penalty I would be so grateful. Again, I am very sorry for my mistake. Thank you very much for your consideration.

Sincerely,


Terry T. Bramer

