

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000014175

1. Entity Name

CONSIGN ME, INC.

R

FILED
Jul 12, 2000 8:00 am
Secretary of State

07-12-2000 90010 023 ***150.00

Principal Place of Business

8935 N.W. 23RD ST
CORAL SPRINGS FL 33065

Mailing Address

8935 N.W. 23RD ST
CORAL SPRINGS FL 33065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0643447

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MIRANDA, JANET R
8935 N.W. 23RD ST
CORAL SPRINGS FL 33065

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
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 P ☐ Delete
NAME MIRANDA, JANET R
STREET ADDRESS 8935 N.W. 23RD ST
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

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:

JANET R. MIRANDA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-6-00

Date

Daytime Phone #

(954) 575-0717

July 6, 2000

Attachment
07/06/00 000014175
00060357

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED I DID NOT
RECEIVE THIS PAPERWORK UNTIL
JULY 5, 2000. THIS IS THE SECOND
YEAR THIS HAS HAPPENED. I HAVE
ENCLOSED MY ~~\$150.00 FEE FOR THIS~~
YEAR. THANK YOU.

JANET MIRANDA
CONSIGN ME, INC
8935 NW 23 ST.
CORAL SPRINGS, FL 33065