

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90439 025 ***150.00

DOCUMENT # P96000038694 (1)

1. Entity Name

FANTASY, TAN, INC.

071366

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2653 ULMERTON ROAD

Suite, Apt., etc.

3. Mailing Address

2653 ULMERTON ROAD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

CLEARWATER, FL

City & State

CLEARWATER, FL

4. FEI Number

59-3377156

Applied For

Not Applicable

Zip

34622

Country

USA

Zip

36622

Country

USA

5. Certificate of Status Desired

☐

-\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

PUNZAK, DAVID R.

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

BARNETT TOWER, ONE PROGRESS PLAZA

200 CENTRAL AVENUE, SUITE 2300

City

ST. PETERSBURG

FL

Zip Code

33701-4352

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IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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 PD
NAME TORGUSEN, ROBERT
STREET ADDRESS 715 PINTA DRIVE
CITY-ST-ZIP TIERRA VERDE, FL 33715-2021

TITLE VSTD
NAME FIRTH, WILLIAM D.
STREET ADDRESS 540 CARILLON PKWY, #2111
CITY-ST-ZIP ST. PETERSBURG, FL 33716

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert G. Torgusen 4/30/02 727 572 8266

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR