

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90222 033 ***150.00

DOCUMENT # P96000056476

1. Entity Name
DRAPES & BLINDS BY TESSIE, INC.

Principal Place of Business
 1349 NW 161 AVE
 PEMBROKE PINES FL 33028

Mailing Address
 1349 NW 161 AVE
 PEMBROKE PINES FL 33028

1349 NW 161 Ave.

2. Principal Place of Business

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Pembroke Pines
City & State

City & State

33028
Zip

USA
Country

33028
Zip

USA
Country

4. FEI Number 65-0679380

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BHAGWANDIN, DEOCHANDRA
 1349 NW 161 AVE
 PEMBROKE PINES FL 33028

Name
Same
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 *D. Bhagwandin*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE *April 22nd 2002*

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *P.D.* ☒ **Delete**
NAME **BHAGWANDIN, TAJNEE**
STREET ADDRESS 1349 NW 161 AVE
CITY-ST-ZIP PEMBROKE PINES FL 33028

TITLE *P.D.S.* ☒ **Change** ☐ **Addition**
NAME **D. Bhagwandin**
STREET ADDRESS 1349 NW 161st Ave
CITY-ST-ZIP Pmbk Pines, FL 33028-1233

TITLE *SD* ☒ **Delete**
NAME **BHAGWANDIN**
STREET ADDRESS 1349 NW 161 AVE
CITY-ST-ZIP PEMBROKE PINES FL 33028

TITLE *D, T.* ☒ **Change** ☐ **Addition**
NAME **Tajinne Bhagwandin**
STREET ADDRESS 1349 NW 161st Ave.
CITY-ST-ZIP Hollywood, FL 33028

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
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: *D. Bhagwandin* *D. BHAGWANDIN*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 22nd
JAN 18 2002
 Date

954 4503176
 Daytime Phone #

CR2E034 (9/01)