

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000057357

1. Entity Name

LINDA'S HATS BY-U, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90021 013 ***158.75

Principal Place of Business

Mailing Address

10461 S.W. 177TH STREET
MIAMI FL 33157

10461 S.W. 177TH STREET
MIAMI FL 33157-5134

2. Principal Place of Business

18505 S.W. 104th Ave Unit #6

3. Mailing Address

18505 S.W. 104th Ave Unit #6

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Fla

City & State

Miami Fla

4. FEI Number

65-0686449

Applied For

Not Applicable

Zip

33157

Country

USA

Zip

33157

Country

USA

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

WEBB, LINDA

10461 S.W. 177TH STREET
MIAMI FL 33157

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PC ☐ Delete
NAME WEBB, LINDA
STREET ADDRESS 10461 S.W. 177TH STREET
CITY-ST-ZIP MIAMI FL 33157

TITLE Vice-President ☐ Change ☒ Addition
NAME Beverly A. Webb
STREET ADDRESS Miami, Fla - 33189
CITY-ST-ZIP 21362 Sw. 112 Ave Apt # 104

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Asst. Vice-President ☐ Change ☒ Addition
NAME Charlotte Y. Brown
STREET ADDRESS 14215 madison St.
CITY-ST-ZIP Miami, Fla 33176

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☐ Change ☒ Addition
NAME Lawanda F. Webb
STREET ADDRESS 10461 S.W. 177th St.
CITY-ST-ZIP Miami, Fla 33157

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 of 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)