

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000068560

1. Entity Name

TAYLOR PROPERTIES AND INVESTMENTS, INC.

FILED

May 01, 2000 8:00 am
Secretary of State

05-01-2000 90063 006 ***150.00

Principal Place of Business

Mailing Address

20547 OLD CUTLER RD. #108
MIAMI FL 33189

20547 OLD CUTLER RD. #108
MIAMI FL 33189-2455

2. Principal Place of Business

3. Mailing Address

20547 Old Cutler Rd #217

20547 Old Cutler Rd #217

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Miami Fla 33189

miami Fla

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

33189

U.S.

33189

U.S.

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

JONES, CHARLES L
9900 SW 168TH ST., STE. 9
MIAMI FL 33157

Name

Joseph Taylor

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

20547 Old Cutler Rd #217

City

Miami

FL

Zip Code

33189

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	D	☒ Delete
NAME	TAYLOR, JOSEPH	
STREET ADDRESS	20530 SW 82ND AVE.	
CITY-ST-ZIP	MIAMI FL 33189	
TITLE	PVST	☒ Delete
NAME	TAYLOR, JOSEPH	
STREET ADDRESS	20530 SW 82ND AVE.	
CITY-ST-ZIP	MIAMI FL 33189	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☒ Change ☐ Addition
NAME	Taylor, Joseph	
STREET ADDRESS	20547 Old Cutler Rd #217	
CITY-ST-ZIP	Miami Fla 33189	
TITLE	PVST	☒ Change ☐ Addition
NAME	Taylor, Joseph	
STREET ADDRESS	20547 Old Cutler Rd #217	
CITY-ST-ZIP	Miami Fla 33189	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00

(305) 254-2006

CR2E034 (9/99)