

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
 05-10-2001 90066 014 ***150.00

0064381

DOCUMENT # P96000089711

1. Entity Name
CHARLO'S ENTERPRISE, INC.

Principal Place of Business
3038 JOHN YOUNG PARKWAY, STE. 8
ORLANDO FL 32804

Mailing Address
3038 JOHN YOUNG PARKWAY, STE. 8
ORLANDO FL 32804

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

8



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3415608**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

CHARLES, CECIL
7305 WOODWORTH WAY
ORLANDO FL 32818

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's 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, 2001 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

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

DPT
CHARLES, CECIL
7305 WOODWORTH WAY
ORLANDO FL 32818

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

DVS
CHARLES, LINDA
7305 WOODWORTH WAY
ORLANDO FL 32818

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

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 CITY - ST - ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
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 CITY - ST - ZIP

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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **CECIL CHARLES - Cecil Charles**

4-25-01

407-293-7500

Date

Daytime Phone #

CR2E034 (10/00)