

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000091519

1. Entity Name

TRANSPLANTED YANKEE, INC.

FILED

02 AUG 12 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

~~1140 KANE CONCOURSE~~

~~1140 KANE CONCOURSE~~

~~FIFTH FLOOR~~

~~FIFTH FLOOR~~

~~BAY HARBOR ISLANDS FL 33154~~

~~BAY HARBOR ISLANDS FL 33154~~

2. Principal Place of Business

3. Mailing Address

600 NE 36th Street

600 NE 36th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#304

#304

City & State

City & State

Miami FL

Miami FL

Zip

Country

Zip

Country

33137

US

33137

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0842127

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

~~SILVERS, ROBERT~~

~~1140 KANE CONCOURSE~~

~~FIFTH FLOOR~~

~~BAY HARBOR ISLANDS FL 33154~~

Name

Randall Hilliard

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

600 NE 36th Street

City

Miami

FL

Zip Code

33137

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/23/2002

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 \$550.00

After September 13, 2002 Fee will be \$750.00

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 NAME ☐ Delete

PVTS HILLIARD, RANDALL

STREET ADDRESS ~~1140 KANE CONCOURSE, 5TH FLOOR~~

CITY-ST-ZIP ~~BAY HARBOR ISLANDS FL 33154~~

TITLE NAME ☒ Change ☐ Addition

STREET ADDRESS 600 NE 36th Street #304

CITY-ST-ZIP Miami, FL 33137

TITLE NAME ☐ Delete

D HILLIARD, RANDALL

STREET ADDRESS ~~1140 KANE CONCOURSE, 5TH FLOOR~~

CITY-ST-ZIP ~~BAY HARBOR ISLANDS FL 33154~~

TITLE NAME ☒ Change ☐ Addition

STREET ADDRESS 600 NE 36th Street #304

CITY-ST-ZIP Miami, FL 33137

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS 200007169672--6

CITY-ST-ZIP -08/16/02--01056--006

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS *****158.75 *****158.75

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/23/2002 (305) 469-9069

Date

Daytime Phone #

CR2E034 (4/02)

Transplanted Yankee, Inc.

600 NE 36th Street Lobby Miami FL 33137 305 438 0296 Fax 305 438 0364

July 21, 2002

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee FL 32301

Re: Transplanted Yankee, Inc. Document #P96000091519

To Whom It May Concern:

I received this renewal form in the mail yesterday, July 17. I was very surprised that it had not been taken care of and apologize for the oversight. The form had gone to my previous Registered Agent's office and the original form was never forwarded to me until yesterday.

Enclosed please find \$158.75 to cover reinstatement costs.

Thank you in advance for your time and consideration.

Very truly yours,



Randall Hilliard
President