2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2000 8:00 am
Secretary of State
08-08-2000 90008 033 ***550.00

DOCUMENT # P96000093432

1. Entity Name
TJM DESIGNS UNLIMITED, INC.

(R)

Principal Place of Business	Mailing Address
1332 NOELL BLVD. PALM HARBOR FL 34683	1332 NOELL BLVD. PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8530 ORSI CT	PO Box 16054
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: New Port Richey, Fl	City & State: Clearwater Fl
Zip: 34655 Country:	Zip: 33766 Country:

4. FEI Number 59-3411948 ☐ 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
BENWARE, ALAN J ~~8800 133RD AVENUE N.~~ ~~SUITE 16~~ ~~LARGO FL 34643~~	Name Street Address (P.O. Box Number is Not Acceptable) 2000 West Bay Drive Largo, Fl 33770 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 $550.00
After SEPTEMBER 13, 2000 Min. 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 STREET ADDRESS CITY-ST-ZIP	P MACKINNON, THOMAS 1332 NOELL BLVD PALM HARBOR FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition 8530 ORSI CT New Port Richey, Fl 34655
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (5/00)

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] SIGNATURE REQUIRED 7/31/00 727-725-5360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

D00768 70

Attachment
Doc #
P96000093432

TJM DESIGNS UNLIMITED, INC.

Department of State

3336

7/30/2000

550.00

I NEVER RECIEVED the first notice — Probably because of the move — If you could find it in your heart to allow a refund on this it would be appreciated!

Thank you,

TJM Designs Unlimited, In

550.00