

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90089 039 ***150.00

DOCUMENT # P96000093574

1. Entity Name
LARRY'S WHOLESALE EXCHANGE, INC.

Principal Place of Business
5631 N.E. 16TH TERRACE
FORT LAUDERDALE FL 33334
US

Mailing Address
5631 N.E. 16TH TERRACE
FORT LAUDERDALE FL 33334
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0706166**

Applied For

Not Applicable

5. Certificate of Status Desired **NO** ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LITTLE, LARRY S
5631 N.E. 16TH TERRACE
FORT LAUDERDALE FL 33334

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. 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

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 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 **D** ☐ Delete
NAME **LITTLE, LARRY S**
STREET ADDRESS **5631 N.E. 16TH TERRACE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33334**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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.

954-849-6329

SIGNATURE:

SIGNATURE REQUIRED - LARRY S. LITTLE 8-19-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

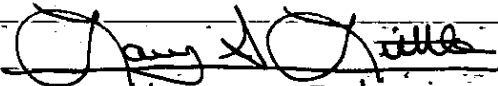
8-19-2002

P9100000935.74

TO WHOM IT MAY CONCERN,

AS PER MY CONVERSATION WITH MR.
SHAWN TONER WITH YOUR DEPARTMENT, THIS
LETTER IS TO STATE THAT THE ENCLOSED
2002 UNIFORM BUSINESS REPORT IS THE ONLY
AND FIRST NOTIFICATION THAT I HAVE RECEIVED.
AS PER YOUR OFFICE, ENCLOSED PLEASE
FIND THE MONEY ORDER IN THE AMOUNT OF
\$150.00.

SINCERELY,


LARRY S. LITTLE
(LARRY'S WHOLESALE EXCHANGE)
FEI # 65-0706166