

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000094520

1. Entity Name
PTC CARIBBEAN, INC.

FILED
Jul 01, 2002 8:00 am
Secretary of State

07-01-2002 90311 042 ***550.00

Principal Place of Business

3605 CURTIS LANE
MIAMI FL 33133

Mailing Address

3605 CURTIS LANE
MIAMI FL 33133

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 65-0732834

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

SCHIMMEL, JOSEPH BARRY
9400 S. DADELAND BOULEVARD, SUITE 600
MIAMI FL 33156

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 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, 2002 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 DP ☐ Delete
NAME HANFT, MICHELE
STREET ADDRESS 3605 CURTIS LANE
CITY-ST-ZIP MIAMI FL 33133

TITLE P ☒ Change ☒ Addition
NAME Jeffrey Hanft
STREET ADDRESS 3605 CURTIS LANE
CITY-ST-ZIP MIAMI FL 33133

TITLE DVT ☐ Delete
NAME HANFT, MICHELLE
STREET ADDRESS 3605 CURTIS LANE
CITY-ST-ZIP MIAMI FL 33133

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

TITLE DS ☐ Delete
NAME HALQUIST, JENNIFER
STREET ADDRESS 308 EGRET LANE
CITY-ST-ZIP WESTON FL 33327

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

TITLE D ☒ Delete
NAME HULITT, S. BROOKS
STREET ADDRESS 729 S. SECOND STREET
CITY-ST-ZIP PHILADELPHIA PA 19147

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Michele Hanft SIGNED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/02

Date

305 666 8386

Daytime Phone #

CR2E034 (9/01)