Daytime Phone #

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 13, 2001 8:00 am Secretary of State DOCUMENT # P96000100865 1. Entity Name TPG PRESS, INC. 04-13-2001 90044 007 \*\*\*150.00 Principal Place of Business Mailing Address 15271 N.W. 60TH AVE. 15271 N.W. 60TH AVE. 944404 STE 101 STE 101 MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 65-0742224 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILVERIO, MARK V Street Address (P.O. Box Number is Not Acceptable) 44 WEST FLAGLER STREET, SUITE 2450 MIAMI FL 33130 City Zip Code purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits SIGNATURE Signature, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition TITL F Delete TITLE ☐ Change NAME NAME PELLETIER, RAYMOND STREET ADDRESS STREET ADDRESS 15271 N.W. 60TH AVE., SUITE 106 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33014 ☐ Change ☐ Addition TITLE ☐ Delete TITI F NAME PELLETIER, KIMBERLY F NAME STREET ADDRESS STREET ADDRESS 15271 N.W. 60TH AVE., SUITE 106 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33014 TITLE Delete Delete TITLE NAME PELLETIER, RAYMOND JR. NAME STREET ADDRESS 15271 N.W. 60TH AVE., SUITE 106 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33014 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME BARIBEAU, JOYCE STREET ADDRESS STREET ADDRESS 15271 N.W. 60TH AVE., SUITE 106 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33014 TITLE ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 64-0161 CITY-ST-ZIP CITY-ST-7(P TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR