

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019577

1. Entity Name **JENNIFER TYLER, INC**  
**2140 NE 123RD STREET**  
**NORTH MIAMI, FL 33181**

FILED

02 DEC 11 PM 12:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**2140 NE 123RD ST**

3. Mailing Address

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**NORTH MIAMI, FL**

City & State

4. FEI Number

**65-0818614**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

**CLAIRE E TYLER**

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

**12000 N BAYSHORE DR #212**

City

**NORTH MIAMI**

**FL**

Zip Code

**33181**

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

**(No change)**

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. ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE **D/VP**  
NAME **CLAIRE E TYLER**  
STREET ADDRESS **12000 N BAYSHORE DR #212**  
CITY - ST - ZIP **NORTH MIAMI FL 33181**

TITLE **D/P**  
NAME **JENNIFER M TYLER**  
STREET ADDRESS **12000 N BAYSHORE DR #212**  
CITY - ST - ZIP **NORTH MIAMI FL 33181**

TITLE **D/ST**  
NAME **DENNIS D NICHOLS**  
STREET ADDRESS **2140 NE 123RD ST**  
CITY - ST - ZIP **NORTH MIAMI FL 33181**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**AMENDED TO:**  
TITLE **D/P/VP/ST**  
NAME **CLAIRE E TYLER**  
STREET ADDRESS **12000 N BAYSHORE DR #212**  
CITY - ST - ZIP **NORTH MIAMI FL 33181**

TITLE  
NAME **800009473018**  
STREET ADDRESS **12/11/02--01065--002 \*\*61.25**  
CITY - ST - ZIP

TITLE  
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CITY - ST - ZIP

TITLE  
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 on an attachment with an address, with all other like empowered.

SIGNATURE:

**CLAIRE E TYLER, SECY/PRES 12/5/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*g n l n*

## TRANSMITTAL LETTER

December 5, 2001

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

~~SUBJECT: Amend Profit Annual Report~~

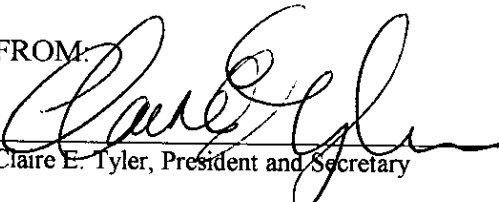
Enclosed is the Amended Annual Report for:

JENNIFER TYLER, INC.  
2140 NE 123<sup>RD</sup> STREET  
NORTH MIAMI, FL. 33181

and a check in the amount of \$61.25 to cover the filing fee.

There are only changes in officers and directors.

FROM:

  
\_\_\_\_\_  
Claire E. Tyler, President and Secretary

Jennifer Tyler, Inc.  
2140 NE 123<sup>rd</sup> Street  
North Miami, Fl. 33181  
Telephone: 305-865-6453