

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019913 (7) *R*

1. Entity Name

T.A.K. CARIBBEAN EXPORTERS & IMPORTERS, INC.

FILED
Jun 15, 2000 8:00 am
Secretary of State

06-15-2000 90004 027 ***150.00

Principal Place of Business

6299 SUNRISE BLVD
SUITE C, 201
SUNRISE, FLORIDA 33313-6178

Mailing Address

6299 SUNRISE BLVD
SUITE C, 201
SUNRISE, FLORIDA 33313

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

#65-0772073

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KIFFIN, TETRICK A.
6299 SUNRISE BLVD
SUITE C, 201
SUNRISE, FLORIDA 33313-6178

7. Name and Address of New Registered Agent

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 TETRICK A. KIFFIN

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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

TITLE D ☐ Delete

NAME KIFFIN, TETRICK A.
STREET ADDRESS 6299 SUNRISE BLVD,
CITY-ST-ZIP SUNRISE, FLORIDA 33313

TITLE D ☐ Delete

NAME KIFFIN, KEVIN A.
STREET ADDRESS 3811 SW 69 AVE
CITY-ST-ZIP miramar, florida 33023

TITLE D ☐ Delete

NAME KIFFIN, ANSWORTH
STREET ADDRESS 3811 SW 69 AVE
CITY-ST-ZIP MIRAMAR, FLORIDA 33023

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition

NAME KIFFIN, TETRIENNE
STREET ADDRESS 3811 SW 69 AVE
CITY-ST-ZIP MIRAMAR, FLORIDA 33023

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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: KEVIN A. KIFFIN DIRECTOR/SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)