

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90276 001 ***300.00

DOCUMENT # P97000047198

1. Entity Name

SUNFAST TANNING CENTERS, INC.

Principal Place of Business

**3140 W. FEDERAL HWY
 LIGHTHOUSE POINT FL 33064
 US**

Mailing Address

**3140 W. FEDERAL HWY
 LIGHTHOUSE POINT FL 33064
 US**

2. Principal Place of Business

19151 SILVER FOX TRAIL

Suite, Apt. #, etc.

3. Mailing Address

13151 SILVER FOX TRAIL

Suite, Apt. #, etc.

City & State

PalM Bch Gdn FL

City & State

PalM Bch Gdn FL

Zip

33418

Country

Zip

33418

Country

4. FEI Number

65-0673810

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HANTSUFF, BONNIE

9140 W. FEDERAL HWY

LIGHT HOUSE POINT FL 33064

7. Name and Address of New Registered Agent

Name

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

13151 SILVER FOX TRAIL

City

PalM Bch Gdn FL

Zip Code

33418

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

TITLE ☐ Delete
 NAME **P**
HANTSTUFF, BONNIE
 STREET ADDRESS **3140 W. FEDERAL HWY**
 CITY-ST-ZIP **LIGHT HOUSE POINT FL 33064**

TITLE ☐ Delete
 NAME **S**
MARCHUSSAUT, GUY
 STREET ADDRESS **13151 SILVERFOX TRL**
 CITY-ST-ZIP **PALM Bch Gdn FL 33418**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **13151 SILVER FOX TRAIL**
 CITY-ST-ZIP **PALM Bch Gdn FL 33418**

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

TITLE ☐ Change ☐ Addition
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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)