

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90131 048 ***150.00

DOCUMENT # **P97000049010**

1. Entity Name

TRI - FOW INC

Principal Place of Business

Mailing Address

7945 DILIDDO BLVD
MIRAMAR FL 33023

979202

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

65-0788918

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

JOHN UHETT P
7945 DILIDDO BLVD
MIRAMAR FL 33023

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
 NAME **JOHN UHETT PRESIDENT**
 STREET ADDRESS **7945 DILIDDO BLVD**
 CITY-ST-ZIP **MIRAMAR FL 33023**

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

TITLE ☐ Delete
 NAME **DANE UHETT V.P.**
 STREET ADDRESS **7945 DILIDDO BLVD**
 CITY-ST-ZIP **MIRAMAR FL 33023**

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

TITLE ☐ Delete
 NAME **JANICE UHETT SECRETARY**
 STREET ADDRESS **7945 DILIDDO BLVD**
 CITY-ST-ZIP **MIRAMAR FL 33023**

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

TITLE ☐ Delete
 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:

J. UHETT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/10/01

Date

Daytime Phone #

CR2E034 (5/01)

Attachment

979202

TRI-FON, INC.

7945 Dillido Blvd., Miramar, FL 33023
(954) 967-9394 Fax (954) 967-0722

#P97000049010

TO WHOM IT MAY CONCERN.

AS PER CONVERSATION WITH CHRISTY ON
8/29/01 NOTING THAT I DID NOT

RECEIVE A RENEWAL FORM. (ORIGINALLY)

WHICH WAS SENT BY MAIL AND RECEIVED ~~AND~~

9/9/01 AFTER MY REQUEST.

PLEASE SEE FORM AND

ORIGINAL FEE. THANKS.

Yours Truly

J. Wells President.