

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90062 040 ***150.00

DOCUMENT # **P97000053771** ✓

1. Entity Name
**Beasley Enterprises
Travel Services, Inc.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
154 Ridge Rd. NW
Suite, Apt. #, etc.

3. Mailing Address
154 Ridge Rd. NW
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Largo Florida
Zip
33770 Country
USA

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Largo Florida
Zip
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USA

4. FEI Number
59-3451436
Applied For
☐ Not Applicable

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
Paul Beasley
Street Address (P.O. Box Number is Not Acceptable)
154 Ridge Rd. NW
City
Largo FL Zip Code
33770

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) ☒

**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 P/S NAME Carol J. Beasley STREET ADDRESS 154 Ridge Rd. NW CITY-ST-ZIP Largo FL 33770	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE VP/T NAME Paul B. Beasley STREET ADDRESS 154 Ridge Rd. NW CITY-ST-ZIP Largo FL 33770	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: **Paul Beasley** **April 27, 2002** **727-584-5266**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)