

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90512 004 ***150.00

0087815

DOCUMENT # P97000054936

1. Entity Name

TWIN PEAK MANAGEMENT, INC.

Principal Place of Business

Mailing Address

2607 MCKINLEY STREET
HOLLYWOOD FL 33020
US

2607 MCKINLEY STREET
HOLLYWOOD FL 33020
US

2. Principal Place of Business

1350 SE 3rd Ave
Suite, Apt. #, etc.
404

3. Mailing Address

1350 SE 3rd Ave
Suite, Apt. #, etc.
404

City & State

Dania, FL

City & State

Dania, FL

Zip

33004

Country

USA

Zip

33004

Country

USA

4. FEI Number

65-0764452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

INGRAM, ALISON
2607 MCKINLEY STREET
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name Alison Ingram

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

1350 SE 3rd Ave 404

City

Dania

FL

Zip Code

33004

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, 2001 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 PD
NAME INGRAM, ALISON
STREET ADDRESS 2607 MCKINLEY STREET
CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Ingram, Alison
STREET ADDRESS 1350 SE 3rd Ave 404
CITY-ST-ZIP Dania, FL 33004 ☒ Change ☐ Addition

TITLE VO
NAME Michael Ingram
STREET ADDRESS 1350 SE 3rd Ave 404
CITY-ST-ZIP Dania, FL 33004 ☐ Change ☒ Addition

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

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

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

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

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 #

1/13/01

305 762 1333

CR2E034 (10/00)