2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State
09-12-2000 90017 015 ***158.75

DOCUMENT # P97000071713

1. Entity Name
TNK CORPORATION

Principal Place of Business	Mailing Address
7908 TRAVELERS STREET DRIVE BOCA RATON FL 33433	7908 TRAVELERS STREET DRIVE BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8561 NW 68th Street	8561 NW 69th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State: Miami, FL
Zip: 33166 Country: USA	Zip: 33166 Country: USA

4. FEI Number 65-0782379 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JOSEPHER, GLORIA R
2100 PONCE DE LEON BLVD.
SUITE 920
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: Josepher Gloria R
Street Address (P.O. Box Number is Not Acceptable): 2055 LeJeune Rd Ste 1001
City: Coral Gables FL Zip Code: 33134

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 ______________________________ DATE
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 $550.00
After SEPTEMBER 13, 2000 Min. 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 NAME STREET ADDRESS CITY-ST-ZIP	PTD ALEGRIA, JULIO C 7908 TRAVELERS STREET DRIVE BOCA RATON FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD BROWN, VIOLETA 7908 TRAVELERS STREET DRIVE BOCA RATON FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (5/00)

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

attachment
P97000071713
B0106034

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O.BOX1500
TALLAHASSEE, FL 32302-1500

RE: Late fee

To whom it may concern,

We are responding to the second notice of the (UBR) 2000, since the first notice was never received. This might had happened during the period that took our registered agent to move to a new office.

We would like to ask your permission to waive the late fee and please receive the enclosed payment for $158.75 of the UBR and the Certificate of Status.

If you may have any further inquiries please do not hesitate to contact me at: (305) 470-9004.

Sincerely,

VIOLETA BROWN
VicePresident