

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000071713

1. Entity Name
TNK CORPORATION

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90068 023 ***150.00

Principal Place of Business

8561 NW 68TH STREET
MIAMI FL 33166
US

Mailing Address

8561 NW 68TH STREET
MIAMI FL 33166
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0782379**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

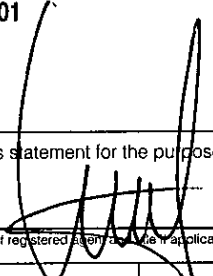
6. Name and Address of Current Registered Agent

JOSEPH, GLORIA R
2655 LEJEUNE RD STE 1001
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **Andres Lamus**
Street Address (P.O. Box Number is Not Acceptable)
8561 NW 68 street
City **Miami** FL Zip Code **33166**

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  **ANDRES LAMUS, SALES MANAGER** DATE **Apr 10/01**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	PTD			
	ALEGRIA, JULIO C	7908 TRAVELERS STREET DRIVE	BOCA RATON FL 33433	
	SVD			
	BROWN, VIOLETA	7908 TRAVELERS STREET DRIVE	BOCA RATON FL 33433	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

17-03-01

Date

305-470 9004

Daytime Phone #

CR2E034 (10/00)