

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

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91460 013 ***150.00

DOCUMENT # P98000007464

1. Entity Name

NOTHING BUT SHOWERS, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11875 SW 188th STREET

Suite, Apt. #, etc.

3. Mailing Address

11875 SW 188th STREET

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FL 33177

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MIAMI, FL 33177

4. FEI Number
65-0807880

Applied For
☐ Not Applicable

Zip
33177

Country
MIAMI-DADE

Zip
33177

Country
MIAMI-DADE

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
CHANDRADATH P. BALDEO

Street Address (P.O. Box Number is Not Acceptable)
11875 SW 188th STREET

City MIAMI, **FL** 33177

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

B. P. Baldeo

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/20/2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) **XX**

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 PD
NAME BALDEO, CHANDRADATH P.
STREET ADDRESS 11875 SW 188th STREET
CITY-ST-ZIP MIAMI, FL 33177

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IN THIS SPACE**

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: *B. P. Baldeo* CHANDRADATH P. BALDEO, PRES. 4/20/02 (305) 235-6850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED34B (12/01)