

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90095 035 \*\*\*150.00

**DOCUMENT # P98000017890**

1. Entity Name  
**QUAYNA, INC.**

Principal Place of Business <b>4475 NORTH OCEAN BOULEVARD, VILLA 17A          DEL RAY BEACH FL 33483</b>	Mailing Address <b>4475 NORTH OCEAN BOULEVARD, VILLA 17A          DEL RAY BEACH FL 33483</b>
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2. Principal Place of Business <b>4475 N. Ocean Blvd.</b>	3. Mailing Address <b>4475 N. Ocean Blvd.</b>
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Suite, Apt. #, etc. <b>Villa 17A</b>	Suite, Apt. #, etc. <b>Villa 17A</b>
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City & State <b>Delray Beach, FL</b>	City & State <b>Delray Beach, FL</b>
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Zip <b>33483</b>	Country <b>USA</b>	Zip <b>33483</b>	Country <b>USA</b>
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4. FEI Number <b>59-3507718</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**GREENWELD, TEDD  
 2921.S.W. 2ND AVENUE  
 FT. LAUDERDALE FL 33315**

**7. Name and Address of New Registered Agent**

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b>
Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (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 \$550.00  
 After September 13, 2002 Fee 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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPT MERILLAT, RICHARD D 1680 COTTAGE GROVE MANITOU BEACH MI 49253</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S MERILLAT, LYNETTE S 1680 COTTAGE GROVE MANITOU BEACH MI 49253</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPT Charles T. Fisher III 100 Renaissance Center, Suite 3520 Detroit, MI 48243</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S Margaret K. Fisher 100 Renaissance Center, Suite 3520 Detroit, MI 48243</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (4/02)

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:** Charles T. Fisher III  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-29-02 (313) 225-3093  
 Date Daytime Phone #

Attachments

Quayna, Inc.  
4475 N. Ocean Blvd., Villa 17A  
Delray Beach, FL 33483

August 23, 2002

# P98000017890


Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Request for Waiver of Late Filing Fee

To Whom It May Concern:

This letter is to request waiver of the \$400 late fee for Quayna, Inc.'s 2002 Uniform Business Report. Quayna first received the 2002 report by mail on July 9, 2002. Therefore, Quayna did not receive the Report in time to file by May 1 and, pursuant to Florida Statute 607.193(2)(b), the \$400 late fee should be waived. A check for \$150 is enclosed with the Report.

Sincerely,

  
Charles T. Fisher III  
President

CTF/km

Enclosures