FILED

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 18, 2002 8:00 am P98000029637 DOCUMENT # **Secretary of State** 1. Entity Name 02-18-2002 90176 047 \*\*\*237.50 TARPON POINTE SERVICES, INC. Principal Place of Business Mailing Address 110 E BROWARD BLVD 110 E 8ROWARD BLVD FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0832784 Not Applicable Zip Country Zip Country \$8.75 Additional Fee Required 87.50 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent enclosed Name SMITH, DENNIS D Street Address (P.O. Box Number is Not Acceptable) 110 SE 6TH ST, 15TH FL FORT LAUDERDALE FL 33301 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (9/01) TITLE TITLE ☐ Addition ☐ Delete Change ALLEN, CELESTE V NAME 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE SV ☐ Delete 3 ITIT ☐ Change Addition KNAPP, DOUGLAS NAME NAME 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition GARCIA, NORBERTO 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HANRATTY, JOHN NAME NAME 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition tripp, norman NAME NAME 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 CITY-ST-7IP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 of the corporation or the receiver of the corporation of the c

SIGNATURE:

changed, or on an attachm

REQUIREDNOrberto Gardia SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

address, with all other like empower



Altachvent Da 8000029637

January 25, 2002

Division of Corporations
UBR Filings
P.O. Bex 1500 Macro

Tallahassee, FL 32302-1500

RE: Tarpon Pointe Services, Inc. EIN: 65-0832784

Dear Sir or Madam:

Enclosed please find the annual report for the above-named corporation along with a check for \$237.50. This is the \$150.00 filing fee and \$67.50 for "Certificates of Status".

I request that you send 10 original "Certificates of Status" to my attention so that I can complete state registrations for Tarpon Pointe Services, Inc.

Thank you for your attention to this matter,

Slendfiöllingsworthed

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