## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PR

## Sep 22, 2000 8:00 am Secretary of State DOCUMENT # P98000047728 1. Entity Name TIME SAVER OF TAMPA, INC. 09-22-2000 90005 029 \*\*\*150.00 Principal Place of Business Mailing Address 1910 W KENNEDY BLVD. 4140 W. KENNEDY BLVD. TAMPA FL 33606 **TAMPA FL 33609** B0107452 3. Mailing Address 2. Principal Place of Business 4148 W. Kennedy BLVd DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3511643 33609 Tampa Not Applicable Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SABA, WALID Street Address (P.O. Box Number is Not Acceptable) 1910 W KENNEDY BLVD. TAMPA FL 33606 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 Change ☐ Addition TITLE ☐ Delete TITLE SABA, WALID NAME NAME 1910 W KENNEDY BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33606 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITL F NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 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

FILED

attachment # p98000017728 B0107452

Florida Department of State Division of Corporations

Re: Uniform Business Report (UBR)

According to my records, this is the first notice I received regarding the annual fee for the (UBR). The mailing address stated on the form is "4140 W. Kennedy Blvd.", the correct mailing address is "4148 W. Kennedy blvd.". I am guessing that the first notice might have gone to the wrong hand and trashed out, because I could not find it in my outstanding bills.

Please-accept the enclosed check for \$150, representing the fee for the 2000 annual reportations with the (UBR) form.

Thank you for your understanding and cooperation in solving this matter. If additional information is needed, please do not hesitate to write or call.

Sincerely yours;

Walid Saba President.

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