

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000057470

1. Entity Name
T-Y HOLDINGS, INC.

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90003 007 ***150.00

0005578

Principal Place of Business
118 WILLET WAY
DAYTONA BEACH FL 32119

Mailing Address
118 WILLET WAY
DAYTONA BEACH FL 32119 **NEW**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
648 BROWN PELICAN DRIVE

City & State
DAYTONA BEACH, FL

Zip
32119

Country
USA

4. FEI Number 59-3521009

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
MOGBO, CHUCK
2331 N STATE ROAD 7
STE 124
LAUDERHILL FL 33313

NEW →

7. Name and Address of New Registered Agent
Name
JOE LOGUICIL CPA
Street Address (P.O. Box Number is Not Acceptable)
555 W. GRAMMA BLVD
City
ORMOND BEACH FL Zip Code
32174

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)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

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				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YUSUF, TUNDE			NAME			
STREET ADDRESS	7015 CAMARINA CALLE		648 BROWN PELICAN	STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		DAYTONA BEACH, FL 32119	CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YUSUF, OLUSOLA			NAME			
STREET ADDRESS	7015 CAMARINA CALLE		648 BROWN PELICAN	STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		DAYTONA BEACH, FL 32119	CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YUSUF, MOHAMMED			NAME			
STREET ADDRESS	7015 CAMARINA CALLE		648 BROWN PELICAN DR.	STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		DAYTONA BEACH, FL 32119	CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YUSUF, IBRAHIM			NAME			
STREET ADDRESS	7015 CAMARINA CALLE		648 BROWN PELICAN DR.	STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		DAYTONA BEACH, FL 32119	CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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 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

Date

Daytime Phone #

CR2E034 (10/00)