

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

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91759 035 ***150.00

DOCUMENT # **P98000058344** ✓
1. Entity Name
TEAM BUILDERS & ASSOCIATES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Georgiadis Peter
Suite, Apt. #, etc.
4500 BUCHANAN ST.
City & State
HOLLYWOOD FL
Zip
33021 Country
USA

3. Mailing Address
SAME
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number
65-0848179
Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name
Georgiadis Peter Pres.
Street Address (P.O. Box Number is Not Acceptable)
4500 BUCHANAN ST
HOLLYWOOD FL
City
FL Zip Code
33021

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 reinstalling) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐
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 NAME STREET ADDRESS CITY - ST - ZIP	PRES Peter Georgiadis 4500 BUCHANAN ST. HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR HENRY LIPKINS 2549 VAN BUREN ST. #3 HOLLYWOOD, FL 33021
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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: **P. Georgiadis**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1 2002 **954-448-8810**
Date Daytime Phone #

CR2E034B (12/01)