

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90457 015 ***150.00

DOCUMENT # P98000070274

1. Entity Name

TRIM ENDLESS OF BOCA RATON, INC.

Principal Place of Business

176 N.W. 20TH STREET
 BOCA RATON FL 33431

Mailing Address

176 N.W. 20TH STREET
 BOCA RATON FL 33431

2. Principal Place of Business

3. Mailing Address

3030 Castle Pines Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Duluth, GA

4. FEI Number

65-0861689

Applied For

Not Applicable

Zip

Country

Zip

Country

30097

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WOLLSTEIN, CYNTHIA
176 N.W. 20TH STREET
BOCA RATON FL 33431

Name

Wollstein, Cynthia

Street Address (P.O. Box Number is Not Acceptable)

190 NW 20th Street

City

Boca Raton

FL

Zip Code

33431

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

C. Wollstein

C. Wollstein

4/27/01

Signature, typed or printed name of registered agent and title if applicable.

(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 \$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 NAME ☐ Delete
PTD
WOLLSTEIN, EDWARD
 STREET ADDRESS **17760 FIELDBROOK CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE NAME ☒ Change ☐ Addition
3030 Castle Pines Drive
 STREET ADDRESS **Duluth, GA 30097**
 CITY-ST-ZIP

TITLE NAME ☐ Delete
VSD
WOLLSTEIN, CYNTHIA
 STREET ADDRESS **17760 FIELDBROOK CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE NAME ☒ Change ☐ Addition
3030 Castle Pines Drive
 STREET ADDRESS **Duluth, GA 30097**
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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TITLE NAME ☐ Change ☐ Addition
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

C. Wollstein **C. Wollstein**

4/27/01

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

678-473-0243

CR2E034 (10/00)