

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 98000088666

1. Entity Name

TRAINING CAMP (U.S.A.), INC.

FILED

00 NOV 13 PM 5:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2521 N. Hiatus Road
Cooper City, FL 33026

Mailing Address

2521 N. Hiatus Road
Cooper City, FL 33026

2. Principal Place of Business

2521 N. Hiatus Road
Suite, Apt. #, etc.

3. Mailing Address

2521 N. Hiatus Road
Suite Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Cooper City, FL
Zip 33026 Country

City & State

Cooper City, FL
Zip 33026 Country

4. FET Number

65-0873873

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Michael Lewis
2521 N. Hiatus Road
Cooper City, FL 33026

7. Name and Address of New Registered Agent

Name

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

City

FL

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

Michael Lewis-President

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

(NOTE: Registered Agents are qualified persons and must be residents of the State of Florida.)

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, 2000 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P/T/D	Lewis, Michael	2521 N. Hiatus Road	Cooper City, FL 33026
V/S/D	Lewis, Susan	2521 N. Hiatus Road	Cooper City, FL 33026

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing was not paid by fee for a corporation stated in Section 119.02(3)(a), 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 687, 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 fees empowered.

SIGNATURE:

Michael Lewis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Watson & Company, P.A.

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Certified Public Accountants

The Chasyn Building
20401 N.W. 2nd Avenue, Suite 300
(State Road 441)
Miami, Florida 33169
(305) 653-8865
(305) 653-8866
Fax: (305) 654-7751
Broward: 524-0122

watsonpa@aol.com
watsonpa@bellsouth.com

November 9, 2000

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Training Camp (U.S.A.), Inc.
Document No. P98000088666

Dear Sirs/Madam:

We are the Accountant and Power of Attorney for the corporation.

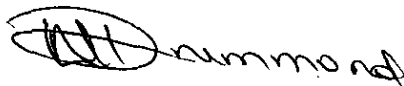
It is our understanding that they did not receive an annual packet, and is therefore requesting that you examine your mailing records which should clarify the non-receipt.

Enclosed is a copy of a 2000 Uniform Business Report, which contains the correct information, as well as a check for \$150.00 as filing fee for said year.

We are also requesting an abatement of any penalty due to the non-receipt of an annual report, and/or a reversal of administrative dissolution, if this occurred.

Should you have any questions, please do not hesitate to contact the undersigned.

Sincerely,
WATSON & COMPANY, PA



for
Pamella B. Watson, CPA
President

PW/kwu

enc.