2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE &

ND TYPED OR PRINTED NAME OF SIGNING

FILED Mar 06, 2000 8:00 am DOCUMENT # **P98000090010** 1. Entity Name **Secretary of State** SUNSATIONS TANNING, INC. 03-06-2000 90097 045 ***150.00 Mailing Address Principal Place of Business 2481 MCMULLEN BOOTH ROAD 2481 MCMULLEN BOOTH ROAD BLDG G BLDG G 917006 CLEARWATER FL 33759-1347 CLEARWATER FL 33759-1346 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3539329 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JONES, JEREMY E Street Address (P.O. Box Number is Not Acceptable) 4727 14 AVE N ST PETERSBURG FL 33713 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. KATE JOVES ☐ Addition DVTS ☐ Change Delete TITLE DOWDELL, TERRY L NAME . K STREET ADDRESS STREET ADDRESS 7501 ULMERTON ROAD #2316 CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 🗹 Addition TITLE DΡ Delete TITLE Change KATE JONES 4727 141 AVEN NAME JONES, JEREMY E NAME STREET ADDRESS STREET ADDRESS 4727 14 AVE N CITY-ST-ZIP St. Actersburg FL 33713 CITY-ST-ZIP ST PETERSBURG FL 33713 Delete ☐ Addition TITLE TITLE KLIGMAN, ERIC J NAME NAME STREET ADDRESS STREET ADDRESS 8151 RIDGE ROAD CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 Change Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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.