

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 02, 2001 08:00 AM
Secretary of State

DOCUMENT # P98000094379

1. Entity Name
LAWCO ENTERPRISES, INC.

Principal Place of Business
4076 BAY LAUREL WAY
BOCA RATON FL 33487

Mailing Address
4076 BAY LAUREL WAY
BOCA RATON FL 33487

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

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

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0433602

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LAWAL OLUSEGUM T
4076 BAY LAUREL WAY
BOCA RATON FL 33487 US

7. Name and Address of New Registered Agent

Name
LAWAL OLUSEGUM T

Street Address (P.O. Box Number is Not Acceptable)
4076 BAY LAUREL WAY

City
BOCA RATON FL Zip Code
33487

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 OLU T. LAWAL

04/02/2001

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

TITLE	P	NAME	STREET ADDRESS	CITY-ST-ZIP	FL 33487	Delete
LAWAL	OLUSEGUM T	4076 BAY LAUREL WAY	BOCA RATON	FL 33487		☐
						☐
						☐
						☐
						☐
						☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	NAME	STREET ADDRESS	CITY-ST-ZIP	FL 33487	Change	Addition
LAWAL	OLUSEGUM T	4076 BAY LAUREL WAY	BOCA RATON	FL 33487		☒	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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: Olu T. Lawal

P

04/02/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)