

2000 UNIFORM BUSINESS REPORT (UBR)

Palak

DOCUMENT # P98000095701
 1. Entity Name TAASHADNE OF ORLANDO, INC.

FILED
 01 MAR 28 AM 9:16
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Principal Place of Business
 4401-J MARTINS WY
 ORLANDO, FL 32808

Mailing Address

2. Principal Place of Business
 4036 GOLFSIDE DR

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 ORLANDO, FL

City & State

Zip
 32808

Country

4. FEI Number
 59-3538920

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LA TAASHA BYRD
 4410-J MARTINS WY
 ORLANDO, FL 32808

7. Name and Address of New Registered Agent

Name
 LA TAASHA BYRD

Street Address (P.O. Box Number is Not Acceptable)
 4036 GOLFSIDE DR

City
 ORLANDO

FL Zip Code
 32808

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)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

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 \$5.00
 Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD Delete
 NAME LA TAASHA BYRD
 STREET ADDRESS 4410-J MARTINS WY
 CITY - ST - ZIP ORLANDO, FL 32808

TITLE PD Change Addition
 NAME LA TAASHA BYRD
 STREET ADDRESS 4036 GOLFSIDE DR
 CITY - ST - ZIP ORLANDO, FL 32808

TITLE Delete
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE Change Addition
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TITLE Delete
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 CITY - ST - ZIP

TITLE Change Addition
 NAME
 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)(l), 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: La Taasha Byrd 3-26-01
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PR2E034 (9/99) 1

Robinson Accounting of America

03/26/01

P98 - 95701

PS 2012

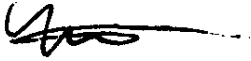
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To Whom It May Concern,

This letter is to inform that TAASHA ONE OF ORLANDO, INC. , has relocated. The named Corporation did not receive a Annual Corporate Report. Due to these circumstances we are asking that you abate the reinstatement fees.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,



Maurice Robinson
Robinson Accounting of America Inc.