

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91374 031 ***150.00

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DOCUMENT # P98000102089

1. Entity Name
BABY BEAR BOUTIQUE, INC.



Principal Place of Business
**31818 US HWY 19 NORTH
PALM HARBOR FL 34684**

Mailing Address
**31818 US HWY 19 NORTH
PALM HARBOR FL 34684**



2. Principal Place of Business

3. Mailing Address

3265 Tampa Road

3265 Tampa Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Palm Harbor, FL

City & State
Palm Harbor FL

4. FEI Number **59-3547224**

Applied For
Not Applicable

Zip

Country

Zip

Country

34684

USA

34684

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

**BLENNER, WALTER W
2708 ALT 19 NORTH, SUITE 701
PALM HARBOR FL 33683**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROBINSON, CATHY
31818 US HWY 19 NORTH
PALM HARBOR FL 34684**

☐ Delete

TITLE
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12. 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 10 or Block 11 if changed, or on an attachment with an address) with all other like empowered.

SIGNATURE:

Cathy Robinson, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/03 727-781-9010
Date Daytime Phone #

CR2E034 (10/02)