

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State

01-17-2002 90040 049 ***150.00

DOCUMENT # P98000102202

1. Entity Name
DEE DEE NASH, INC.

Principal Place of Business

**16695 HEMINGWAY DRIVE
WESTON FL 33326**

Mailing Address

**16695 HEMINGWAY DRIVE
WESTON FL 33326**

2. Principal Place of Business

318 Indian Trace
Suite, Apt. #, etc.
704

3. Mailing Address

318 Indian Trace
Suite, Apt. #, etc.
704

City & State

Weston FL

City & State

Weston FL

4. FEI Number

65-0881420

Applied For

☐ Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ERDEK, DIANE V
16695 HEMINGWAY DRIVE
WESTON FL 33326**

7. Name and Address of New Registered Agent

Name **Diane V Erdek**

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

1260 Canary Island Drive

City

Weston

FL

Zip Code

33327

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

Diane V Erdek

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-8-02

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, 2002 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 **PD** ☒ Delete
NAME **ERDEK, DIANE V**
STREET ADDRESS **16695 HEMINGWAY DR**
CITY-ST-ZIP **WESTON FL 33326**

TITLE **PD** ☐ Delete
NAME **Diane V Erdek**
STREET ADDRESS **318 Indian Trace Ste 704**
CITY-ST-ZIP **Weston, FL 33326**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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)(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:

Diane V Erdek

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-08-02 (954) 349-8536

Date

Daytime Phone #

CR2E034 (9/01)