

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103809

1. Entity Name  
2551 CORP.

**FILED**  
**Jun 04, 2001 8:00 am**  
**Secretary of State**

06-04-2001 90018 045 \*\*\*150.00

0265967

Principal Place of Business  
1828-B N UNIVERSITY DR  
PLANTATION FL 33322

Mailing Address  
1828-B N UNIVERSITY DR  
PLANTATION FL 33322

**00057455**

2. Principal Place of Business  
9430 NW 16 Street

3. Mailing Address  
9430 NW 16 Street

Suite, Apt. #, etc.

City & State  
Plantation, FL

City & State  
Plantation, FL

Zip  
33322

Country  
USA

Zip  
33322

Country  
USA

4. FEI Number  
65-0947294

APPLIED FOR

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

MILLER, GEORGE D  
1828-B N UNIVERSITY DR  
PLANTATION FL 33322

## 7. Name and Address of New Registered Agent

Name  
SARA MILLER

Street Address (P.O. Box Number is Not Acceptable)  
9430 N.W. 16 Street

City  
Plantation

FL

Zip Code  
33322

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 *Sara Miller*

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

(NOTE: Registered Agent signature required when reinstating)

5/30/01

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	D	MILLER, GEORGE D	1828-B N UNIVERSITY DR PLANTATION FL 33322	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
PD	MILLER, SARA	9430 NW 16 Street	Plantation, FL 33322	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VTS	Debra Miller	9430 NW 16 Street	Plantation, FL 33322	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 empowerments.

SIGNATURE:

*Sara Miller* SARA MILLER 5/30/01 (954) 452-4908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)