

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019770

1. Entity Name

TRANS-CARIBE COMMUNICATIONS, INC.

FILED

Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90094 034 ***150.00

Principal Place of Business

P.O. BOX 5222
WINTER PARK FL 32793-5222

Mailing Address

P.O. BOX 5222
WINTER PARK FL 32793-5222

2. Principal Place of Business

9109 Queen Elizabeth Ct.

Suite, Apt. #, etc.

Orlando, FL 32818

City & State

3. Mailing Address

P.O. Box 22484

Suite, Apt. #, etc.

Lake Buena Vista

City & State

Florida

Zip

32818

Country

U.S.A.

Zip

32730

Country

U.S.A.

4. FEI Number

59-3563294

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARCIA, MARIO A.
225 E. ROBINSON ST. STE. 540
ORLANDO FL 32802

7. Name and Address of New Registered Agent

Name

MARIO A. GARCIA

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

315 E. ROBINSON ST.

City

Orlando

FL

Zip Code

32801

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

8/3/00

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 \$550.00 1500

After SEPTEMBER 13, 2000 Min. will be \$750.00

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 STP
NAME ALLEN, SHERRY E
STREET ADDRESS P.O. BOX 5222
CITY-ST-ZIP WINTER PARK FL 32793-5222

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT / STP
NAME SHERRY E. ALLEN-MEYER
STREET ADDRESS P.O. BOX 22484
CITY-ST-ZIP LAKE BUENA VISTA, FL 32830

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

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 employees.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/00

Date

407-532-9039

Daytime Phone #

CR2E034 (5/00)



ATTACHMENT
#P99000019770
0077387
Trans-Caribe Communications, Inc.
"YOUR MULTI-LANGUAGE CONNECTION"

P.O. Box 22484
Lake Buena Vista, Florida 32830

Phone: 407-532-9039 • Fax: 407-294-6103 • E-mail: Transec@aol.com

August 3, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: 2000 UNIFORM BUSINESS REPORT FORM NOT RECEIVED

Dear Sirs/Mesdames:

I had telephoned your offices today to inform that I had not received the UBR form, which was due for filing earlier this year. I believe that the reason for this is that I married early this year and moved my home offices to a new location. However, I have just recently received the UBR form to my new address at 9109 Queen Elizabeth Court, Orlando, Florida 32818 and am enclosing a check for \$150.00 along with the completed form.

Please disregard the penalty given for non-filing of the UBR form since I did not receive the prior one.

Thank you.

Sincerely,

Sherry E. Allen-Meyer
Trans-Caribe Communications, Inc.

/sem

cc: Mario Garcia, P.A.
TCC File