FILED
Jun 23, 2002 8:00 am
Secretary of State
05-29-2002 90688 004 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023846

1. Entity Name

TEPE Enterprises, Inc.

DO NOT WRITE IN THIS SPACE

36470

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1325 Atlantic Ave.	1325 Atlantic Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fernandina Beach, FL	City & State: Fernandina Beach, FL
Zip: 32034 Country: Nassau	Zip: 32034 Country: Nassau

4. FEI Number: 59-3567190 — X Applied For / Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Robert L. Peters, P.A.

Street Address (P.O. Box Number is Not Acceptable): 309 1/2 Centre Street, Ste. 205

City: Fernandina Beach FL Zip Code: 32034

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: Robt Peters
Signature of president or other officer of registered agent (if agent is a corporation) (NOTE: Registered Agent signature required when mail-in) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PD Harry Trevett 1325 Atlantic Avenue Fernandina Beach, FL 32034
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Harry Trevett 5/22/02 904 321 2235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #