

FILED
Jun 07, 2001 8:00 am
Secretary of State

05-17-2001 90375 036 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000040201

1. Entity Name

NEWTAMPAIR, INC.

Principal Place of Business

7628 N 56TH STREET, STE. 1
TAMPA FL 33617-7732

Mailing Address

7628 N 56TH STREET, STE. 1
TAMPA FL 33617-7732

2. Principal Place of Business

10703 Deepbrook Dr

Suite, Apt. #, etc.

3. Mailing Address

PO Box 1519

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Riverview FL

City & State

Riverview FL

4. FEI Number 59-3573791

Applied For

Not Applicable

Zip

33569-8725

Country

Hillsborough

Zip

33568-1519

Country

Hillsborough

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

6. Name and Address of Current Registered Agent

LARROW, DANA B

11007 N 56TH STREET

SUITE 207

TEMPLE TERRACE FL 33617-2953

7. Name and Address of New Registered Agent

Name Dana B Larrow

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

10703 Deepbrook Dr

City Riverview

FL

Zip Code

33569-8725

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

Dana B. Larrow President

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

(NOTE: Registered Agent signature required when reinstating)

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	P	DELETE
NAME	LARROW, DANA B	
STREET ADDRESS	407 COURTNEY	
CITY - ST - ZIP	TAMPA FL 33617	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	Larrow, Dana B	
STREET ADDRESS	10703 Deepbrook Dr	
CITY - ST - ZIP	Riverview FL 33569-8725	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Dana B. Larrow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

6/5/01 813/899-4666

CR2E034 (10/00)