

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 04, 2001 08:00 AM**
Secretary of State**DOCUMENT # P99000042363**1. Entity Name
SUSAN L DOIG LMT, INC.**Principal Place of Business**

1725 NE 7TH STREET #7

FT. LAUDERDALE
33304

FL

Mailing Address

1725 NE 7TH STREET #7

FT. LAUDERDALE
33304

FL

2. Principal Place of Business

5980 NE 22 TERRACE

3. Mailing Address

5980 NE 22 TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FT. LAUDERDALE

FL

City & State

FT. LAUDERDALE

FL

Zip
33308

Country

Zip
33308

Country

4. FEI Number**65-0922252**

Applied For

Not Applicable

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**DOIG SUSAN
1725 NE 7TH STREET #7FT. LAUDERDALE
33304

FL

US

7. Name and Address of New Registered Agent**Name**

O'MALLEY SUSAN

Street Address (P.O. Box Number is Not Acceptable)
5980 NE 22 TERRACE**City**

FT. LAUDERDALE

FL

Zip Code
33308

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 **SUSAN O'MALLEY****04/04/2001**

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	D	☐ Delete
NAME	DOIG SUSAN	
STREET ADDRESS	1725 NE 7TH STREET #7	
CITY-ST-ZIP	FT. LAUDERDALE FL 33304	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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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	D	☒ Change ☐ Addition
NAME	O'MALLEY SUSAN	
STREET ADDRESS	5980 NE 22 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
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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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: Susan O'Malley

Pres

04/04/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)