

2000 UNIFORM BUSINESS REPORT (UE)

DOCUMENT # P99000051275

1. Entity Name

Y AND T, INCORPORATED

05-19-2000 90034026 ***150.00

FILED

00 AUG 10 AM 10:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

3707 BROADWAY
RIVIERA BEACH FL 33404

Mailing Address

3707 BROADWAY
RIVIERA BEACH FL 33404-2335

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

05-1023019

5. Certificate of Status Desired

☐

\$8.75

Fee Required

6. Name and Address of Current Registered Agent

MAHMOUD, YOUSEF
3707 BROADWAY
RIVIERA BEACH FL 33408

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5

Amount

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	MAHMOUD, YOUSEF	
STREET ADDRESS	3707 BROADWAY	
CITY-ST-ZIP	RIVIERA BEACH FL 33408	
TITLE	VP	☐ Delete
NAME	KAHALA, TAYSEER	
STREET ADDRESS	3707 BROADWAY	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
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

TITLE		☐ Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change
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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature

JANET KEARNS, EA

10421 151st Lane N.

Jupiter, FL 33478

561-744-3051

JULY 6, 2000

Florida Department of State

Division of Corporations

P.O. box 6327

Tallahassee, FL 32314

RE: Y and T Incorporated

Reference #P99000051275

We received your letter stating that we must acquire our Federal ID number to process our annual report. However, Getting a hold of the Internal Revenue Service has been impossible. We have filed form SS4 by fax because calling their number to obtain an ID number by phone proved worthless because we could never get through to them. We are waiting for the Internal Revenue Service to send our number and as soon as we have it we will contact your department. We feel this should not obligate us to the substantial penalty you impose for late filing.

Y & T Incorporated

3707 Broadway

Riviera Beach, FL 33404