

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000051351

1. Entity Name

FRANCES TEJEDA CONSULTING, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -9 PM 5:33

Principal Place of Business

415 ANCHORAGE LANE
NORTH PALM BEACH FL 33408

Mailing Address

415 ANCHORAGE LANE
NORTH PALM BEACH FL 33408-4805

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0924482

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEJEDA, FRANCES
415 ANCHORAGE LANE
NORTH PALM BEACH FL 33408

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. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
FRANCES TEJEDA
415 ANCHORAGE LN
N PALM BCH FL 33408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
000003481970--6
-11/30/00--01101--013
*****150.00 ***150.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Frances Tejeda
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-863-5670

CR2E034 (3/99)

P99000051351

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Francis Tejeda Consulting, Inc.

415 Anchorage Lane
North Palm Beach, FL 33408

(561) 863-5670

October 19, 2000

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Please excuse my tardiness in filing the Uniform Business Report for the year 2000. At the beginning of the year my husband was diagnosed with terminal cancer. Please extend to me consideration because of the extreme circumstances that I have been faced with through the year, so I will not have to pay additional late filing fees. Thank you in advance for your help.

Sincerely,

Francis S Tejeda /ay

Francis S. Tejeda