

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2000 08:00 AM**
Secretary of State**DOCUMENT # P99000054233****1. Entity Name**
TAYLORKANARICK, INC.**Principal Place of Business**8610 S.W. 212TH STREET
APT 201
MIAMI
33189

FL

Mailing Address8610 S.W. 212TH STREET
APT 201
MIAMI
33189

FL

2. Principal Place of Business
13966 SW 90TH AVE**3. Mailing Address**
13966 SW 90TH AVESuite, Apt. #, etc.
APT JJ 101Suite, Apt. #, etc.
APT JJ 101

DO NOT WRITE IN THIS SPACE

City & State
MIAMI

FL

City & State
MIAMI

FL

4. FEI Number
65-0937105**Applied For**
Not Applicable**Zip**
33176**Country****Zip**
33176**Country****5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent**KANARICK STEVEN
8610 S.W. 212TH STREET
APT 201
MIAMI
33189

FL

7. Name and Address of New Registered AgentName
KANARICK STEVEN
Street Address (P.O. Box Number is Not Acceptable)
13966 SW 90TH AVE
APT JJ 101
City
MIAMI**FL** **Zip Code**
33176**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)

04/30/2000

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****TITLE** VTD ☐ Delete
NAME KANARICK STEVEN
STREET ADDRESS 8610 S.W. 212TH STREET
CITY-ST-ZIP MIAMI FL 33189**TITLE** PSD ☐ Delete
NAME KANARICK YVETTE
STREET ADDRESS 8610 S.W. 212TH STREET
CITY-ST-ZIP MIAMI FL 33189**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**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 IN 11****TITLE** VTD ☒ Change ☐ Addition
NAME KANARICK STEVEN
STREET ADDRESS 13966 SW 90TH AVE APT# JJ 101
CITY-ST-ZIP MIAMI FL 33176**TITLE** PSD ☒ Change ☐ Addition
NAME KANARICK YVETTE
STREET ADDRESS 13966 SW 90TH AVE APT #JJ 101
CITY-ST-ZIP MIAMI FL 33176**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
NAME
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** Yvette Kanarick

Mrs. 04/30/2000