

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071085

1. Entity Name

Sum Spa, Inc.



FILED
Aug 31, 2001 8:00 am
Secretary of State

08-31-2001 90117 036 ***150.00

Principal Place of Business

Mailing Address

18126 Sweet Jasmine DR.

18126 Sweet Jasmine DR

Tampa FL 33647

Tampa FL 33647

2. Principal Place of Business

3. Mailing Address

18126 Sweet Jasmine DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tampa

FL

4. FEI Number

59-3638659

Applied For

Not Applicable

Zip

Country

Zip

Country

33647

USA

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

Froesh, Krista

18126 Sweet Jasmine DR

Tampa FL 33634

Name

Froesh, Krista

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

18126 Sweet Jasmine DR

City

Tampa

FL

Zip Code

33634

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

Krista

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	Froesh, Krista	
STREET ADDRESS	18126 Sweet Jasmine DR.	
CITY-ST-ZIP	Tampa FL 33634	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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

Krista

8/2/01

CR2E034 (10/00)

attachment
D# P9900071085
B0063265

SUN SPA, INC.

18126 Sweet Jasmine Dr., Tampa, FL 33647
Telephone: (813)994-9515

August 22, 2001

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Annual Report
P 9900071085
year 2001

Dear Ladies and gentlemen:

In accordance with our telephone conversation with one of your staff, I am writing this letter along with the enclosed form of annual report and a check of \$ 150.00.

As you may note in the annual report form, the address was changed. We could not figure out why the address was not corrected and we did not receive renewal notice form at all.

The correct mailing address is as follows:

18126 Sweet Jasmine Dr., Tampa, FL 33647

Inasmuch as we never received the form and any notice at all, we are respectfully requesting you to abate any possible late filing penalty.

We thank you very much for your consideration in this matter and please feel free to call me should you have any questions in this matter.

Very truly yours,



Krista, Froesh
Enclosure

RECEIVED
DIVISION OF CORPORATIONS

2001