

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90273 025 ***550.00

DOCUMENT # P99000075142

1. Entity Name

YACHTING'S FINEST, INC.

Principal Place of Business

**3383 S.W. 11TH AVENUE
 FORT LAUDERDALE FL 33315**

Mailing Address

**3383 S.W. 11TH AVENUE
 FORT LAUDERDALE FL 33315**

2. Principal Place of Business

3. Mailing Address

2771 N.E. 15TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4

City & State

City & State

FT. LAUDERDALE, FL 33304

4. FEI Number

65-0951132

Applied For

Not Applicable

Zip

Country

Zip

Country

33304

U. S. A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CARLSON, ROBERT W
 3383 S.W. 11TH AVENUE
 FORT LAUDERDALE FL 33315**

7. Name and Address of New Registered Agent

Name

ROBERT W. CARLSON

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

2771 N.E. 15TH ST

4

City

FT. LAUDERDALE

FL

Zip Code

33304

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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 **PD** ☒ Delete
 NAME **CARLSON, ROBERT W**
 STREET ADDRESS **215 N.E. 16TH AVENUE, #105**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **CARLSON, ROBERT W.**
 STREET ADDRESS **2771 N.E. 15TH ST, # 4**
 CITY-ST-ZIP **FT. LAUDERDALE, FL. 33304**

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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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/01

Date

954-224-2628

Daytime Phone #

CR2E034 (5/01)