

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90200 026 ***150.00

DOCUMENT# P99000081155

1. Entity Name

ARCHER EVALUATIONS, INC.

Principal Place of Business

**1320 S. DIXIE HWY., STE. 860
 CORAL GABLES FL 33146**

Mailing Address

**1320 S. DIXIE HWY., STE. 860
 CORAL GABLES FL 33146**

00013443

2. Principal Place of Business

12651 S. DIXIE HWY

3. Mailing Address

12651 S. DIXIE HWY

Suite, Apt. #, etc.

SUITE 201

Suite, Apt. #, etc.

SUITE 201

City & State

PINECREST, FL

City & State

PINECREST, FL

Zip

33156

Country

USA

Zip

33156

Country

USA

4. FEI Number

65-0944790

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

ARCHER, VANESSA

**1320 S. DIXIE HWY., STE. 860
 CORAL GABLES FL 33146**

7. Name and Address of New Registered Agent

Name

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

12651 S. DIXIE HWY

SUITE 201

City

PINECREST

FL

Zip Code

33156

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, 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

TITLE **D** ☐ Delete
 NAME **ARCHER, VANESSA**
 STREET ADDRESS **1320 S. DIXIE HWY., STE. 860**
 CITY-ST-ZIP **CORAL GABLES FL 33146**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **12651 S. DIXIE HWY - 201**
 CITY-ST-ZIP **PINECREST, FL 33156**

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

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

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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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/01
 Date

305-252-8700
 Daytime Phone #

CR2E034 (10/00)