

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91743 022 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000095281 ✓

1. Entity Name

Bombshell, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8511 NW 53rd Ct.

3. Mailing Address

8511 NW 53rd Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Lauderhill, Florida

City & State

Lauderhill, Florida

4. FEI Number

65-1047855

Applied For

Not Applicable

Zip

33351

Country

U.S.

Zip

33351

Country

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Michael Santucci Attorney at Law

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

888 E. Las Olas Blvd.

City

Ft. Lauderdale, FL

FL

Zip Code

33301

**DO NOT WRITE
IN THIS SPACE**

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

new office only

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) ☒

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP

~~Tonya Seavers~~
8

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

President = P
Tonya Seavers
8511 NW 53rd Ct.
Lauderhill, FL 33351

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Creative Director & VP
Carla Bell
342 SW 121st Terrace
Pembroke Pines, FL 33025

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Tonya L. Seavers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/06/02 (954) 938-7734

Date

Daytime Phone #

CR2E034B (12/01)