2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000097862 Jul 26, 2000 8:00 am Secretary of State 1. Entity Name HOUSE OF TEA COMPANY 07-26-2000 90010 026 ***150.00 Principal Place of Business Mailing Address 2520 SW 22 STREET SUITE 2-141 2520 SW 22 STREET SUITE 2-141 MIAMI FL 33145 MIAMI FL 33145 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE City & State Applied For City & State Not Applicable Zip Country Zip Country \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALEXANDER G. CUBAS, P.A. Street Address (P.O. Box Number is Not Acceptable) 10621 NORTH KENDALL DRIVE SUITE 204 **MIAMI FL 33176** City Zip Code 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees D. (See criteria on back) Make Check Payable to Department of State 117 OFFICERS AND DIRECTORS 12.= ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F D TITLE Change Addition ☐ Delete NAME ALVAREZ, MARTHA FUENTES NAME STREET ADDRESS STREET ADDRESS 2520 SW 22 STREET SUITE 2-141 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33145** ☐ Delete Change ☐ Addition TITLE TITLE NAME ALBA, NEVADA NAME STREET ADDRESS 2520 SW 22 STREET SUITE 2-141 STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP **MIAMI FL 33145** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP. Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 00 305 323 Y Y J 8

P9500097862





HOUSE OF TEA COMPANY

2250 Southwest 22nd Street, Suite 2-141 Miami, Florida 33145 Tel. (305) 787-7245 Fax (305) 860-9244

July 14, 2000

Department of State Division of Corporations

We received a notice marked 2nd notice for the Uniform Business Report. We are writing to ask you to waive the late penalty of \$400.00 because This was in actuality the only notice we received. There was never a 1st. Enclosed you will find a check for \$150.00. We hope you will grant our Request.

Sincerely,

Martha Alvarez

Vice- President

