

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90042 022 ***158.75

DOCUMENT # P99000099775

1. Entity Name

HAVE BROOM WILL TRAVEL, INC.

Principal Place of Business

**2808 N. TAMPA STREET
TAMPA FL 33602**

Mailing Address

**2808 N. TAMPA STREET
TAMPA FL 33602**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2873982
59-3614043

Applied For

Not Applicable

5. Certificate of Status Desired

**XX \$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RICHARDS, LINDA

**2808 N. TAMPA STREET
TAMPA FL 33602**

Name

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

City

FL

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

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, 2002 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 **PSTD** ☐ Delete
NAME **RICHARDS, LINDA**
STREET ADDRESS **2808 N. TAMPA STREET**
CITY-ST-ZIP **TAMPA FL 33602**

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

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

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:

Linda Richards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02 (813)301-0056
Date Daytime Phone #

CR2E034 (9/01)

Attachment

BOA99829

DDG# P9906669775

Have Broom Will Travel, Inc.

2808 N. Tampa Street

Tampa, Florida 33602

P (813) 301-0056, F (813) 301-1062

April 25, 2002


Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

We original completed the UBR form online and submitted our check via mail with a note advising of the same. Your letter dated March 25, 2002, stated you did not receive the form, and it should be submitted within 30 days of your letter. Enclosed is the completed form, however not received by you within the specified timeframe. The reasoning being that we received your letter on or about April 22, 2002 (see copy of post-marked envelope).

Call us if you have any questions.

Respectfully,



Linda Richards,
President

cc: File