

2001 UNIFORM BUSINESS REPORT (UBR)

4/3

FILED
May 23, 2001 8:00 am
Secretary of State

04-30-2001 90111 039 ***150.00

DOCUMENT # P99000104289

1. Entity Name

TAYLOR GROUP, INC.

Principal Place of Business

9304 SOUTHWEST 77TH AVENUE
 SUITE C-6
 MIAMI FL 33156

Mailing Address

9304 SOUTHWEST 77TH AVENUE
 SUITE C-6
 MIAMI FL 33156

2. Principal Place of Business

2708 NE 14 Street

Suite, Apt. #, etc.

Suite #7

City & State

Pompano Beach, FL

Zip

33062

Country

USA

3. Mailing Address

2708 NE 14 Street

Suite, Apt. #, etc.

Suite #7

City & State

Pompano Beach, FL

Zip

33062

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0965000

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

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

Randy J. Taylor Pres

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/01

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	PD	<input type="checkbox"/> Delete
NAME	TAYLOR, RANDY J	
STREET ADDRESS	9304 SOUTHWEST 77TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	STD	<input type="checkbox"/> Delete
NAME	TAYLOR, DIANNE E	
STREET ADDRESS	9304 SOUTHWEST 77TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, Randy J	
STREET ADDRESS	2708 NE 14 St #7	
CITY-ST-ZIP	Pompano Bch, FL 33062	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, Dianne E	
STREET ADDRESS	2708 NE 14 St #7	
CITY-ST-ZIP	Pompano Bch, FL 33062	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Randy J. Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/2001 954-942-3284

Date

Daytime Phone #

Randy J. TAYLOR

CR2E034 (10/00)