

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107090

1. Entity Name

TSRC OF FLORIDA, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90060 004 ***150.00

Principal Place of Business

1901 W. CYPRESS CREEK RD., STE. 202
FT. LAUDERDALE FL 33309

Mailing Address

1901 W. CYPRESS CREEK RD., STE. 202
FT. LAUDERDALE FL 33309

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

65-0964791

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	Joe COLLARD	3040 JASMINE TERRACE	DELRAY BEACH, FL 33483	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	TOM HO SH KO	4900 N. OCEAN BLVD., #406	FT. LAUDERDALE, FL 33308	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	JAMES ROBERTSON	87 CAYUGA ROAD	FT. LAUDERDALE, FL 33308	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	JOHN MORTON	11400 MT. VERNON DRIVE	PLANTATION, FL 33325	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	DIXIE NEWTON	9101 NW 15th STREET	PLANTATION, FL 33322	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Date

Daytime Phone #

CR2E034 (9/99)