

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 26, 2001 8:00 am**
Secretary of State

01-26-2001 90090 005 ***158.75

DOCUMENT # P99000107090

1. Entity Name

TSRC OF FLORIDA, INC.

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

65-0964791

Not Applicable

5. Certificate of Status Desired

☒**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEOB
COLLARD, JOE
3040 JASMINE TERR
DELRAY BEACH FL 33483** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
HOSHKO, TOM
4900 N. OCEAN BLVD #406
FORT LAUDERDALE FL 33308** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COOD.
ROBINSON, JAMES
27 CAYUGA RD
FORT LAUDERDALE FL 33308** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EV/COO/S/P
James F Robertson
27 Cayuga Road
Fort Lauderdale, FL 33308** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFST
MORTON, JOHN
11400 MT VERNON DR
PLANTATION FL 33325** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EV/CFO/T/AS
Andrew C Hill
5000 N Ocean Blvd, #208
Fort Lauderdale, FL 33308** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DFAS
NEWTON, DIXIE
9101 NW 15TH ST
PLANTATION FL 33322** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
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: *Andrew C Hill*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew C Hill, Mgr

Date

1/16/01

Daytime Phone #

954-493-8601

CR2E034 (10/00)