

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90106 022 ***150.00

DOCUMENT # P99000111106

1. Entity Name
LB TALBOT & ASSOCIATES, INC.



Principal Place of Business
**1780 NE 191ST ST. UNIT 507
N MIAMI BEACH FL 33179**

Mailing Address
**1780 NE 191ST ST. UNIT 507
N MIAMI BEACH FL 33179**

2. Principal Place of Business

437 S.W. 122nd TERRACE
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 260638
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Pembroke Pines, FL

City & State

MIAMI, FL 33267

4. FEI Number

65-0969845

Applied For

☐ Not Applicable

Zip

33025

Country

U.S.A.

Zip

33026

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name

LISA TALBOT

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

437 S.W. 122nd TERRACE

City **Pembroke Pines**

FL

Zip Code

33025

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

LISA TALBOT - DIRECTOR PRESIDENT 3-17-03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **TALBOT, LISA B**
STREET ADDRESS **1780 NE 191ST ST, UNIT 507**
CITY-ST-ZIP **N MIAMI BEACH FL 33179**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **LISA B. TALBOT**
STREET ADDRESS **437 S.W. 122nd TERRACE**
CITY-ST-ZIP **Pembroke Pines, FL 33025**

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

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-03

954-392-4634

Date

Daytime Phone #

CR2E034 (10/02)