

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S11104

1. Entity Name

GRACELYN, INC.

Principal Place of Business

9601 W. CALUSA CLUB DR.
MIAMI FL 33186

Mailing Address

9601 W. CALUSA CLUB DR.
MIAMI FL 33186-1505

2. Principal Place of Business

12812 SW 122 AVENUE

Suite, Apt. #, etc.

3. Mailing Address

12812 SW 122 AVENUE

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip
33186

Country
U.S.A.

Zip
33186

Country
U.S.A.

4. FEI Number

65-0401074

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEPHEN, JOSEPH C.
9601 WEST CALUSA CLUB DR.
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name
JOE STEPHEN (JOSEPH C.)

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

12812 SW 122 AVENUE

City
MIAMI

FL

Zip Code
33186

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

PRESIDENT

03/10/00

DATE

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEPHEN, JOSEPH C. 9601 W. CALUSA CLUB DR. MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT STEPHEN JOE (JOSEPH C.) 12812 SW 122 AVENUE MIAMI, FLORIDA 33186	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOE STEPHEN - PRESIDENT 03/10/00

Date

Daytime Phone #

305-255-9600

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90011 026 ***150.00



DO NOT WRITE IN THIS SPACE

CR20004/0/000