

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2001 8:00 am
Secretary of State

07-17-2001 90003 046 ***150.00

DOCUMENT # S30057

1. Entity Name

THE ORIGINAL WATER DOCTOR TURNING POINT ENTERPRI

Principal Place of Business

**6559 N.W. 40TH CT.
BOCA RATON FL 33496
US**

Mailing Address

**TURNING POINT ENTERPRISES. INC.
6559 N.W. 40TH CT.
BOCA RATON FL 33496
US**

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

65-0239429

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

MILLER, BILL

6559 N.W. 40TH CT.

BOCA RATON FL 33496

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	MILLER, BERNARD B.	
STREET ADDRESS	6559 NW 40TH CT.	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

TURNING POINT ENTERPRISES, INC.

ATTACHMENT
A007555

6559 N.W. 40TH CT
BOCA RATON, FL 33496

Phone 561-241-3936

July 10, 2000 / 2001

S30057

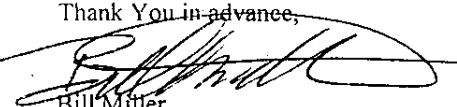
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Doc# S30057-EIN# 65-0239429

To Whom it May Concern;

The initial form UBR 2000 was never received in the mail. The first report received was the report requesting a \$550.00 filing fee. This corporation has been in existence for several years of which the filing fee has been paid on time with the initial notice. Due to the fact that the initial notice was not received this year, please accept the payment of \$150.00 as the filing fee.

Thank You in advance,


Bill Miller
President

The original water Doctor Turning Point Enterprises
6559 NW 40th Canal
Boca Raton FL 33496
(561) 241-3936.