

2000 UNIFORM BUSINESS REPORT (UBR)

1052

DOCUMENT #

G88696

1. Entity Name

Swinarski & Company, P.A.

FILED

00 JUL 10 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2311 10th Ave N., Suite # 3
LAKE WORTH FL 33461

2. Principal Place of Business

3. Mailing Address

2311 10th Ave N

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3

City & State

City & State

LAKE WORTH FL

4. FEI Number

59-2373749

Applied For

Not Applicable

Zip

Country

Zip

Country

33461

USA

5. Certificate of Status Desired

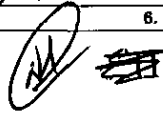
☐

\$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

 Chip Swinarski
7424 Venetian Way
LAKE CLARKE SHORES FL 33406

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)

7/2/00

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 **P** Swinarski, Ella ☐ Delete
NAME
STREET ADDRESS 2311 10th Ave N. Suite 3
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 700003349827-3
CITY-ST-ZIP -08/08/00--01088--002
*****300.00 *****300.00

TITLE **V** Swinarski, Chip ☐ Delete
NAME
STREET ADDRESS 7424 Venetian Way
CITY-ST-ZIP LAKE CLARKE FL 33406

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

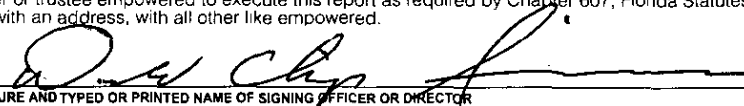
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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 #

 7/2/00

CR2E034 (9/99)

2932

SWINARSKI & COMPANY, P. A.

Certified Public Accountants
2311 10th Avenue North
Lake Worth, FL 33461

Ella Swinarski, CPA
Chip Swinarski, CPA, MST

Tel (561) 540-9940
Fax (561) 540-9947

June 14, 2000

Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Ladies & Gentlemen;

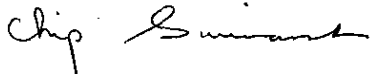
It has come to our attention that we have not paid our current and prior annual corporate fee resulting in the dissolution of Swinarski & Company, P.A. When we discovered this, we immediately called your office to request assistance. We explained we moved during early 1999 and did not receive our annual corporate fee form. It wasn't until this year when we were looking for it we discoverer that we had not paid the prior year as well. Your agent informed us to not send the 2000 fee, rather, to send both years with an explanation of why we did not timely file and pay our fees.

Please rescind the dissolution of our corporation and accept our payment for both years, \$ 300.

If you require additional information, please do not hesitate to contact me.

Thank you for your assistance.

Respectfully yours,



Chip Swinarski, CPA, MST