

# 2002 UNIFORM BUSINESS REPORT (UBR)

0025651 AV

**DOCUMENT # P01000036420**

1. Entity Name  
**SR DESIGN, INC.**

FILED

02 DEC 30 PM 12:21

Principal Place of Business  
**1780 SW 112 TERRACE  
 MIRAMAR FL 33025**

Mailing Address  
**1780 SW 112 TERRACE  
 MIRAMAR FL 33025**

580009740435

12/30/02--01056--023 \*\*150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**2921 SW 139 AVE**  
 Suite, Apt. #, etc.

3. Mailing Address  
**2921 SW 139 AVE**  
 Suite, Apt. #, etc.

City & State  
**MIRAMAR, FL**

City & State  
**MIRAMAR, FL**

Zip  
**33027** Country  
**USA**

Zip  
**33027** Country  
**USA**

4. FEI Number  
**05-1097241**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**RIBEIRO, SIBILA**  
~~1780 SW 112 TERRACE~~  
**MIRAMAR FL 33025**

7. Name and Address of New Registered Agent

Name  
**RIBEIRO, SIBILA**

Street Address (P.O. Box Number is Not Acceptable)  
**2921 SW 139 AVE**

City  
**MIRAMAR** FL Zip Code  
**33027**

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 *Sibila Ribeiro* DATE **12/20/02**

Signature, typed or printed name of registered agent and filer 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 \$550.00**  
**After September 13, 2002 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RIBEIRO, SIBILA</b> <b>1780 SW 112 TERRACE</b> <b>MIRAMAR FL 33025</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>RIZZO, LEONARD</b> <b>1780 SW 112 TERRACE</b> <b>MIRAMAR FL 33025</b> <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	<input 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
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: *Sibila Ribeiro*

CR2E034 (4/02)

Sibila Ribeiro  
Leonard Rizzo  
SR DESIGN, INC  
2921 SW 139 Ave  
Miramar, FL 33027

December 20, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Ladies and Gentlemen:

We have received your Year 2002 Uniform Business Report Notice of Administrative Dissolution or Revocation. Enclosed with this letter is our 2002 report along with our check in the amount of \$150 to keep the company viable.

We are respectfully requesting that the Division waive the \$600 late filing penalty for the following reason which we believe constitutes reasonable cause for late filing. The original Uniform Business Report was never received in our offices, or perhaps misplaced. As SR Design, Inc. was incorporated in 2001, 2002 was the first year for which the Company was required to file a report, and we were not aware of this requirement until we received your second notice. Additionally, I (Sibila Ribeiro) was involved in a major automobile accident in March of 2002, and have been unable to conduct business as usual while I went through my rehab for back and neck injuries. We also spent the last three months moving our home and office to a new location. It is at this time while unpacking boxes and business supplies that we found the Notice of Administrative Dissolution or Revocation. We are promptly submitting the report and fee now that we are aware of the filing requirement and will file timely reports in the future.

Again, we respectfully request that the Division waive the late filing penalty. Thank you very much for your attention to this matter. Should you have any questions please feel free to contact me at the above address.

Sincerely,

  
President