

2001 UNIFORM BUSINESS REPORT (UBR)

4/5/1

FILED
Jun 02, 2001 8:00 am
Secretary of State

04-05-2001 90003 007 ***150.00

DOCUMENT # P99000087963

1. Entity Name

THE SUMMER HOUSE AND FIELD TRUST, INC.

Principal Place of Business

4201 COLLINS AVENUE
 UNIT 1103
 MIAMI FL 33140

Mailing Address

3560 NW 72 AVE
 MIAMI FL 33122

47870 → 5/18/01



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

APPLIED FOR

105-0530077

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

PHILLIPS, GARY S ESQ.
4000 HOLLYWOOD BOULEVARD
SUITE 265-SOUTH
HOLLYWOOD FL 33021

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 \$150.00
After MAY 1, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	D AMARAL, IVAN D 4201 COLLINS AVENUE UNIT NO. 1103 MIAMI FL 33140	<input type="checkbox"/> Delete
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CR2E034 (10/00)

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

(305) 597-2300 3/20/01
 Date Daytime Phone #



Department of the Treasury
Internal Revenue Service

ATLANTA, GA 39901

Attachment
478170
999000187963

In reply refer to: 0716933151
May 15, 2001 LTR 147C
~~65-6320077~~ 000000 00

00415

SUMMER HOUSE AND FIELD TR
% SUMMER HOUSE AND FIELD TRUST INC
4201 COLLINS AVE UNIT NO 1103
MIAMI FL 33140-3235781

↓
Received
5/18/01

Employer Identification Number: 65-6320077
IRS Control Number:

Dear Taxpayer:

Your employer identification number (EIN) is 65-6320077. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence or documents.

If you have any questions, please call us toll free at 1-800-829-1040. If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

Carolyn Chapman

Carolyn Chapman
Chief, Accounts Management Br. II

Enclosure(s):
Copy of this letter