# **FILED**

<b>ា.</b> Entity Nam	MENT # P9800	0005679		Secreta	001 8:00 a ary of Stat 90381 001 ***300.00	e	6805 AV
Principal Plac 1717 N BAYS 3936 MIAMI FL 331 US		Mailing Address 1717 N BAYSHORE DR 3936 MIAMI FL 33132 US	LAS				
2. Principal F Suite, Apt.	Place of Business	3. Mailing Address Suite, Apt. #, etc.			III 1811) EIII EIII EIII EIII EIII WRITE IN THIS SPACE	! 10010 IB1( LB9)	
		Guite, Apt. 4, etc.		DONOTY	VRITE IN THIS SPACE		_
City & Stat	de	City & State		f. FEI Number APPLIEC	) F()[2]	applied For Not Applicable	-
Zìp	Country	Zip Cou	ntry -	5. Certificate of Status Desire	ed Bequir	dditional ed	
	6. Name and Address of Current R	legistered Agent		7. Name and Address of Ne	w Registered Agent		]
DCITTOOL	I, SCOTT H		Name		مستخب، سرت		-
	AYSHORE DR		Street Address (F	P.O. Box Number is Not Accept	able)		]
3936	THE STATE STATE						1
Miami Fl	33132		City		FL Zip Co	de	1
8. The above	named entity submits this statement for	the purpose of changing its registe	red office or register	ed agent, or both, in the State of	of Florida.		1
, SIGNATURE .				· <del></del>			
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: Register	red Agent signature required	when reinstating)	DATE		4
Tax filing i	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FEE After September 12, 2001 Make Check Payable to D	Fee will be \$750.0		· — •••	<b>00</b> May Be ed to Fees	
11.	OFFICERS AND D	DIRECTORS 12	·	ADDITIONS/CHANGES TO			1_
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		//	ſ	<u> </u>	☐ Change	Addition	
indicated of the cor	pertify that the information supplied with the on this report or supplemental report is poration or the receiver or trustee empty or on an attachment with an address with	fue and accurate and that my signated to execute this report as required to execute this report as required to the control of	ature shall have the s	same legal effect as if made ung	der oath: that I am an office	r or director	

7/16/01

SIGNATURE:

Daytime Phone #

# Attachment 10164 # P9800005629 Memorandum

To: Division of Corps

CC:

From: Scott Deutsch

Date: 7/16/01

S H Deutsch Corporation

In April I sent you a check for the renewal of S H Deutsch Corp—it was sent back with letter stating you needed FEI number. I sent it back but apparently it was never received? Spoke with lady otday who said to resend it with letter.

Please let me know if you have any questions or require further clarification.

Scott Deutsch-305-424-1222

	# <b>P980</b> 0	0000	05679				/ /	tack		· (/
S H DEUTSCH, (	CORPORATION									
	<del></del>	•				-				
Principal Place of Busine	ss		Mailing Address							
1717 N BAYSHORE DR			1717 N BAYSHORE DR			j	1.	2/1	1	
3936 MIAMI FL 33132 US			3936 Miami FL 33132 US				10	2/6	0	
2. Principal Place of Bus	iness		3. Mailing Address		<del></del>					
Suite, Apt. #, etc.			Suite, Apt. #, etc.	<del></del>	<del></del>		DO1	OT WRITE IN THI	S SPACE	
City & State			City & State			4.	4. FEI Number APPLIED FOR		<del> </del> -4-	Applied For Not Applicat
Zip	Country		Zip	Countr	У	5.	Certificate of Status (	Desired	\$8.75 A	
6. Nam	e and Address of Cu	irrent Re	gistered Agent		Name	7. 1	Name and Address	of New Registere	d Agent	
DEUTSCH, SCI 1717 N BAYSH 3936						dress (P.O. E	3ox Number is Not A	cceptable)	·	
MIAMI FL 3313	2			}-	City				Zip Co	
O. The above and a time							ant or both in the C	F		
8. The above named enti	ny submits mis statem	ien ioi ti	e purpose or changing r	its registered	J Glilice OF I	egistered ag	ent, or both, at the 3	i i i i i i i i i i i i i i i i i i i		
SIGNATURE Signature, type	d or printed name of registere	d agent and	title if applicable. (NC	OTE: Registered	Agent signatur	e required when re	anstaling)	DATE		
This corporation is eligible.  Tax filing requirement	nible to esticly its Inta						-			
(See criteria on back)	and elects to do so.	ngible	FILE NOV After MAY 1, 2 Make Check Pays		S \$150.0 vill be \$55	0.00	10. Election Camp Trust Fund Co	paign Financing	\$5.	<b>00</b> May Be ed to Fees
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RT (UBR) Hachnet SCOTT DEUTSCH Date 04/19/2001 04/19/2001 Florida Department of State Reference OO NOT WRITE IN THIS SPACE 4. FEI Number APPLIED FOR Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Original Amt. 150.00 150.00 Street Address (P.O. Box Number is Not Acceptable) Zip Code City Ė١ s registered office or registered agent, or both, in the State of Florida. Balance Due 150.00 150.00 TE: Registered Agent signature required when reinstating) DATE /!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be 001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees ible to Department of State Check Amount 12. ADDITIONS/CHANGES TO OFFICERS'AND DIRECTORS IN 11 Change Addition TITLE Discount NAME STREET ADDRESS CITY-ST-ZIP Change ■ Addition NAME STREET ADDRESS CITY-ST-ZIP Change Payment 150.00 1150.00 300.00 -TITLE Addition 300.00 NAME STREET ADDRESS CITY-ST-ZIP ω TITLE Charige Addition NAME STREET ADDRESS DITY-ST-ZIP CITY-ST-ZIP TILE Delete . Change Additio: TITLE TAME NAME TIREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HILE Delete TITLE ☐ Change Additio: NAME NAME STREET ADDRESS 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 trustge impowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 11 or Block 12 or 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

Daytime Phone #

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901

DATE OF THIS NOTICE: 06-07-2001 NUMBER OF THIS NOTICE: CP 575 A EMPLOYER IDENTIFICATION NUMBER: 65-1108455 FORM: SS-4 0716830485 B

FOR ASSISTANCE CALL US AT: 1-800-829-1040

S H DEUTSCH CORPORATION % SCOTT H DEUTSCH 1717 N BAYSHORE DR PHD 36 MIAMI FL 33132

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

# WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 65-1108455. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

### Form 1120

## 06/04/2001

The due date of your return has passed and we have no record of receiving it. Please file your form by 06-22-2001. The penalties and interest will accrue from the date of the return until it is filed.

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply.