### 2000 UNIFORM BUSINESS REPORT (UBR)

#### **DOCUMENT # 673631** 1. Entity Name WILSON HOWARD ENTERPRISES, INC. FILED nn .ttl 14 AM 10: 31 Principal Place of Business Mailing Address SECRETARY OF STATE 290 S. CONGRESS AVENUE 290 S. CONGRESS AVENUE BOYNTON BEACH FL 33426-4212 BOYNTON BEACH FL 33426-4212 TALL AHASSEE FLORIDA 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-2004793 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOWARD, WILSON Street Address (P.O. Box Number is Not Acceptable) 349436 727 BLVD. CHATELAINE EAST <u>-08/08/00==01065==025</u> **DELRAY BEACH FL 33445** \*\*\*\*150.00 \*\*\*\*150.00 Zip Code City Fl 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing **\$5.00** May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Àdded to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Delete ☐ Change ☐ Addition TITLE TIT! F HOWARD, WILSON NAME NAME STREET ADDRESS 727 BLVD. CHATELAINE E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DELRAY BEACH FL 33445** ☐ Addition TITLE ☐ Change TITLE ☐ Delete HOWARD, PATRICIA NAME NAME STREET ADDRESS STREET ADDRESS 727 BLVD. CHATELAINE E. CITY-ST-7IP CITY-ST-ZIP **DELRAY BEACH FL 33445** Change ☐ Addition TITLE Delete ( TITLE HOWARD, TODD NAME NAME STREET ADDRESS STREET ADDRESS 727 BLVD CHATELAINE E. CITY-ST-7IP CITY-ST-7/P **DELRAY BEACH FL 33445** Change ☐ Addition □ Delete TITLE HOWARD, ERIC NAME NAME STREET ADDRESS STREET ADDRESS 3448 CHAELAINE CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33445 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

GNATURE: SIGNATURE NO TYPET OR PRINTED GAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #

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

# 78292

## Gromko, Porter & Associates

## Accounting / Tax Preparation • Financial Planning Services

306 East Boynton Beach Boulevard Boynton Beach, Florida 33435 Phone (561) 737-8017 • Fax (561) 737-0433

July 10, 2000

To: Florida Dept. Of State

Re: Abatement of penalty

From: Wilson Howard Enterprises, Inc.

FIN: 59-2004793

Document # 673631

At this time we are asking that you abate the penalty for taxpayer. This taxpayer is a Corporation. The gentleman who was to sign and mail the annual return, did not received the return. The president did not realize until a few days ago that he needed to file this report. This is the only time this has happened and should not happen again. If you would please change the mailing address to the registered agent's address so that this problem won't occur again. So, if you would be so kind as to abate the penalty it would be greatly appreciated.

Thank you for all your help.

Sincerely,

Wilson Howard, Registered Agent