FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Aug 01, 2001 8:00 am Secretary of State F00000005020 DOCUMENT # 1. Entity Name ESTUDENTTAX.COM, INC. 08-01-2001 90009 049 \*\*\*150.00 Principal Place of Business Mailing Address 1042 SW DEAUVILLE AVE 1042 SW DEAUVILLE AVE PORT ST LUCIE FL 34953 PORT ST LUCIE FL 34953 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-1031079 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required\_ 7. Name and Address of New Registered Agent Name PERCOCO, LAWRENCE J Street Address (P.O. Box Number is Not Acceptable) 1042 SW DEAUVILLE AVE PORT ST LUCIE FL 34953 City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition Change TITLE ☐ Delete TITLE PERCOCO, LAWRENCE J NAME NAME STREET ADDRESS STREET ADDRESS 1042 SW DEAUVILLE AVE CITY-ST-ZIP PORT ST LUCIE FL 34953 CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE DST PERCOCO, KARIN E NAME STREET ADDRESS 1042 SW DEAUVILLE AVE STREET ADDRESS PORT ST LUCIE FL 34953 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ŤITI F ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 receive 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

SIGNATURE:

changed, or on an attachment

attachment DH FODULUUSUZO BIDUISZ

July 11, 2001

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

I am respectfully requesting that the Department of State waive the \$400.00 late filing fee for our Corporation's 2001 Uniform Business Report. As President of estudenttax.com, Inc., I handle all administrative issues for the company. I had personally filed, by mail, the original UBR report on April 2nd of 2001. Some where along the line the report with the \$150.00 filing fee was lost or misplaced.

Since the original return was filed prior to the May 1<sup>st</sup> deadline, we respectfully request that the penalty be waived. I have taken the liberty of enclosing the required filing fee of \$150.00.

We look forward to successful operations in Florida and will assure you that we will timely file future reports.

Respectfully,

Lawrence J. Percoco

**ESTUDENTTAX.COM**