## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jun 01, 2001 8:00 am Secretary of State **DOCUMENT # F27927** 1. Entity Name 06-01-2001 90003 049 \*\*\*150.00 JOSEPH A. MARTINEAU, D.D.S., P.A. Principal Place of Business Mailing Address C/O WILLIAM R PLATT C/O WILLIAM R PLATT 772251 600 S MAGNOLIA AVE #125 600 \$ MAGNOLIA AVE #125 TAMPA FL 32606 TAMPA FL 32606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2105450 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ----- .. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILLIAM R. PLATT MARTINEAU, JANE P Street Address (P.O. Box Number is Not Acceptable) South Magnolia Ave. C/O JOSEPH MARTINEAU D.D.S. 17 DAVIS BLVD, STE 405 TAMPA FL 33606 Suite 125 Zip Co33606 **Pampa** 8. The above named entity charging its registered office or registered agent, or both, in the State of Florida. -30-2001 SIGNATURE Registered Agent signature required when reinstating) FILE NOW! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 20 11 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payal le to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. SVD TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARTINEAU, JANE NAME STREET ADDRESS 4807 BAYSHORE BLVD F3 STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP PTD TITLE ☐ Delete TITLE ☐ Change Addition | MARTINEAU, JOSEPH A NAME NAME STREET ADDRESS 4807 BAYSHORE BLVD F3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 ITTLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 13. Thereby 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 minimize 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

SIGNATURE:

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O & DIRECTOR

of the corporation or the receiver or trustee empowered to execute this report a changed, or on an attachment with an address, with all other like empowered.

5/29/01

Alecaments

## WILLIAM R. PLATT

ATTORNEY AT LAW

(813) 259-9604 (813) 251-1927 Fax Edgewater Building, Suite 125 600 S. Magnolia Avenue Tampa, FL 33606

VIA FEDERAL EXPRESS

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- May 30, 2001

Secretary of State Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Joseph A. Martineau, D.D.S, P.A.

Gentlemen:

This office represents Joseph A. Martineau, P.A. Enclosed is the 2001 Annual Uniform Business Report together with the filing check and a letter from Dr. Martineau explaining the reason that this filing is late.

I have known Dr. Martineau and his wife for many years and the recent deterioration of her health has been devastating to the family. The onset of her condition became apparent in mid to late March and the diagnosis and brain surgery occured in April.

I respectfully request that you favorably consider request to not impose fees for late filing.

Sincerely yours

William R. Platt

WRP/cch Enclosures

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JOSEPH A. MARTINEAU, D.D.S., P.A.

17 DAVIS BOULEVARD SUITE 405 TAMPA, FLORIDA 33606

JOSEPH A. MARTINEAU, D.D.S.
MAXILLO-FACIAL PROSTHODONTICS

#F27997 772051

5/29/01

(813) 251-5959 FAX (813) 251-3318

Secertary of State Florida Department of Stat Division of Corporations P.O. Box 1500 Tallahassee, Fl. 32302

Dear Sir

I'm asking for relief for this report being filed late for the following reason.

My wife who is the corporate secentary was stricken with brain cancer and lung cancer back in January and I was unaware this report had not been filed. In going through are files at home I discovered this report.

Your understanding would be greatly appreciated.

Sincerely

Joseph A. Martineau,D.D.S.

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