2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2001 8:00 am
Secretary of State
01-22-2001 90145 013 ***150.00

0119763

DOCUMENT # G44105

1. Entity Name
VELKOVITZ ACCOUNTING AND TAX SERVICE, INC.

Principal Place of Business
% DOROTHY VELKOVITZ
~~2011 FLAGER AVENUE~~
KEY WEST FL 33040

Mailing Address
% DOROTHY VELKOVITZ
~~2011 FLAGER AVENUE~~
KEY WEST FL 33040

2. Principal Place of Business: 2601 S. ROOSEVELT BLVD
Suite, Apt. #, etc.: 611A
City & State: KEY WEST, FL
Zip: 611A Country: US

3. Mailing Address: 2601 S. ROOSEVELT BLVD.
Suite, Apt. #, etc.: 611A
City & State: KEY WEST, FL
Zip: 611A Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2306291 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
VELKOVITZ, DOROTHY
~~2011 FLAGER AVENUE~~ 2601 S. ROOSEVELT
KEY WEST FL 33040

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable): 2601 S. ROOSEVELT BLVD
City: KEY WEST FL Zip Code: 33040

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: Dorothy Velkovitz
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

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delete
DP VELKOVITZ, DOROTHY ~~2011 FLAGER AVENUE~~ KEY WEST, FL 00000	☐
	☐
	☐
	☐
	☐
	☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Change	Addition
2601 S. ROOSEVELT BLVD. 611A	☒	☒
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐

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: Dorothy Velkovitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/11/01 Daytime Phone #: 305-294-9357