

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90100 018 ***150.00

0074035 AV

DOCUMENT # H87774

1. Entity Name

EDWARD RACK CORPORATION



Principal Place of Business

NORMAN RACK
6800 N.W. 88TH AVENUE
TAMARAC FL 33321

Mailing Address

NORMAN RACK
6800 N.W. 88TH AVENUE
TAMARAC FL 33321

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2613132**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RACK, NORMAN
6800 N.W. 88TH AVENUE
TAMARAC FL 33321

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

(Make Check Payable to Florida Department of State)

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D RACK, EDWARD**
STREET ADDRESS **6800 NW 88TH AVENUE**
CITY-ST-ZIP **TAMARAC FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D RACK, GENEVIEVE SALLY**
STREET ADDRESS **6800 NW 88TH AVENUE**
CITY-ST-ZIP **TAMARAC FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D RACK, NORMAN C**
STREET ADDRESS **6800 NW 88TH AVE**
CITY-ST-ZIP **TAMARAC FL 33321**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-30-03

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

86140933
87774

August 13, 2003

Edward Rack Corporation
6800 N.W. 88th Avenue
Tamarac, Fl 33321

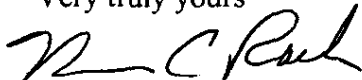
Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl 32302-1500

Dear Taxperson:

I am asking for a waiver of the late fee on this corporation. I never received the prior notice from your office. Enclosed is the filing of the 2003 Uniform Business Report and a check for \$150.00.

Thank you for your help in resolving this matter.

Very truly yours


Norman Rack