

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K34852

1. Entity Name

SUSSMAN SOUTH, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90143 050 ***150.00

Principal Place of Business

JENKINTOWN & BAEDER ROADS
JENKINTOWN PA 19046

Mailing Address

JENKINTOWN & BAEDER ROADS
JENKINTOWN PA 19046

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-1809275**

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

SUSSMAN, MARTIN E.
13744 LEBATEAN LANE
PALM BEACH GARDEN FL 33401

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.

SIGNATURE _____

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **SUSSMAN, MARTIN E.**
CITY-ST-ZIP **P O BOX 374 (NA)
JENKINTOWN PA**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/01

Date

Daytime Phone #

CR2E034 (10/00)



STATE OF FLORIDA
DEPARTMENT OF REVENUE

TALLAHASSEE, FLORIDA 32399-0100

General Tax Administration
Child Support Enforcement
Property Tax Administration
Administrative Services
Information Services

Jim Zingale
Executive Director

FEBRUARY 23, 2001

SUSSMAN HONDA
1543 EASTON RD
P.O. BOX 163
ROSYLN (WILLOW GROVE), PA 19001

CK#213472
AMT:\$150.00
SCREENER:0073

We are returning remittance (s) listed above for the following reasons, as indicated by an X.

XX Check (s) sent to the Florida Department of Revenue in error.

Unable to identify- if this remittance is for taxes administered by the Florida Department of Revenue, please enclose appropriate tax return with your tax identification number and return to the address indicated below.

If this is in payment of Federal taxes, please send to the Internal Revenue Service Center, Atlanta, Georgia 39901.

Your check or money order is not payable to the Florida Department of Revenue and/or is incomplete. Actual payment of taxes cannot be accounted for until this Department receives a correctly completed valid check or money order.

We are returning the attached documentation relating to vehicle title, registration and/or vehicle license tag. The Florida Department of Highway Safety and Motor Vehicles or the local tax collector/tag agency should be contacted. You may contact the Florida Department of Highway Safety, Title & Registration at (850) 488-3881.

Other:

Florida Department of Revenue

Return & Revenue Processing
5050 W. Tennessee Street
Tallahassee, Florida 32399-0100

REMAILED
4/16/01

Attachment
#X34852
750051