

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 16, 2000 8:00 am
Secretary of State

08-16-2000 90004 008 ***150.00

DOCUMENT # K61843

1. Entity Name

DAVID M. WADDELL, C.P.A., P.A.

Principal Place of Business

14721 SW 148 AVE
 MIAMI FL 33196

Mailing Address

14721 SW 148 AVE
 MIAMI FL 33196

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

65-0097679

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

00073276



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WADDELL, CPA, DAVID M
 14721 SW 148 AVE
 MIAMI FL 33196

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD
 NAME WADDELL, CPA, DAVID M
 STREET ADDRESS 14721 SW 148 AVE
 CITY-ST-ZIP MIAMI FL 33196

☐ Delete

TITLE
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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:

David M. Waddell
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/10/00

Date

305 253-2144

Daytime Phone #

CR2E034 (5/00)

Attachment K61843
0079872
David M. Waddell CPA, PA
14721 SW 148 Ave.
Miami, FL 33196
(305)253-2144

pg 2 of 2

081500

7/11/00

Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

K61843

RE: David M. Waddell CPA, PA 65-0097679
Late filing of the annual report

Gentlemen:

I am in receipt of my second notice for the 2000 uniform business report.

I was unaware that this report was not filed by my office. We have searched our records and do not find the cancelled check or the business report form, so I must conclude that it was never recieved by our office. For the past few months our mailing area has had substitue mail carriers and there has been numerous occasions where we have received other's mail even though the address was clearly not our address.

At this time I cannot economically afford the stiff \$400 late filing penalty imposed as my spouse is currently unemployed and we are struggling financially to make ends meet. I submit to you that it would be too severe a hardship to pay. Therefore, I respectfully request that the penalty be waived due to reasonable cause as discussed above.

If you decide that there is no latitude to waive the late filing penalty, I will be forced to wind down the corporation and do business as a sole propriorship. So please let me know you decision.

Thank you for your understanding.

Sincerely,

David Waddell
David Waddell