

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

08-21-2003 90107 038 ***150.00

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DOCUMENT # L94535

1. Entity Name
SALE STORES CORP.



Principal Place of Business 99 NW 183RD STREET 115 MIAMI FL 33169 US	Mailing Address 99 NW 183RD STREET 115 MIAMI FL 33169 US
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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 **65-0208117** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**LANDMAN, BENJAMIN L
20680 NE 4TH COURT
APT 206
MIAMI FL 33179**

7. Name and Address of New Registered Agent
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 _____ (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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSC LANDMAN, BENJAMIN L 20680 NE 4TH CT APT 206 MIAMI FL 33179	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	99 NW 183 ST., SUITE 115 MIAMI, FL 33169	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED **BENJAMIN LANDMAN** **8/18/03** **305-652-0442**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Sale Stores

ATTACHMENT

#L94535

80139463

Sale Stores, Corp

99 NW 183 St, Suite 115, Miami, FL 33169, USA

Tel: (305) 652-0442, Fax: (305) 675-6412

Email: info@salestores1.com ~ Web: www.salestores1.com

Miami, August 18, 2003

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

As mentioned in the attached copy of an email we sent to you we never received the first notice.

As per the offer contained in the reply from Doug (corphelp@dos.state.fl.us), dated August 16, we are enclosing a check for \$150 together with the 2003 Report, and we beg your forgiveness in these hard times.

Thank you very much.

Sincerely,



Benjamin Landman
President

ATTACHMENT
L94535
80139463

De La Cruz, Paola

From: corphelp [corphelp@dos.state.fl.us]
Sent: Monday, August 18, 2003 8:24 AM
To: De La Cruz, Paola
Subject: RE: Profit Annual Report

If you did not receive the preprinted report in January, please mail in the second report along with a check for \$150.00 and a note explaining that you never received the first notice, thank you.

Doug
Internet Access

-----Original Message-----

Sent: Saturday, August 16, 2003 3:00 PM
To: corphelp@mail.dos.state.fl.us
Subject: Profit Annual Report

Dear Sir/Madam:

Our person in charge of accounting lost the Profit Annual Report and we didn't know about the Supplemental Fee (May 1)
Is there a way to pay \$150 for the Profit Annual Report?.

Thanks in advance

SALE STORES CORP
99 NW 183 St., Suite 115
Miami, FL 33169, USA
Tel: 305-652-0442
Fax: 305-652-4356