## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L9500000105

Entity Name

ALLIED RESEARCH COMPANY, L.C.



FILED Jun 27, 2003 8:00 am Secretary of State

06-27-2003 90015 014 \*\*\*\*50.00

Principal Place of Business Mailing Address							İ					
738 NE 20TH AVENUE FORT LAUDERDALE FL 33304 US				738 NE 20TH AVENUE FORT LAUDERDALE FL 33304 US				Bir bir darpı biril 40ik 10ik	<b>44</b> 11 <b>44</b> 11 <b>44</b> 1	13 <b>4 6 6</b> 6 1 1 <b>6</b> 1 1 1 <b>6</b> 1 1 1 <b>6</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18(2) 2(() )88)	
2. Principal Place of Business			3.	3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State				City & State		4. FEI Number 65-0571307				Applied For Not Applicable		
Zip Country				Zip Country			5. Certificate of Status Desired S5.00 Additional Fee Required					1
6. Name and Address of Current I				stered Agent	7. Name and Address of New Registered Agent						1~	
LEIGH, ALAN						Name				<b></b>		
738 NE 20TH AVENUE FORT LAUDERDALE FL 33304				Street Addres			is (P.O. Box Number is Not Acceptable)					-
	•	·				City		· · · · · · · · · · · · · · · · · · ·	FL	Zip Cod	de	-
	named entity ions of regist	y submits this statement fo ered agent.	or the p	ourpose of changing its	register	L ed office or registe	ered agent, or b	ooth, in the State of Flor		 amiliar with,	and accept	_
SIGNATURE .	Signature, typed	or printed name of registered agent	and title	if applicable. (NOT	E: Registere	d Agent signature require	ed when reinstating)		DATE			
				Make Check Payab	le to Fi	FEE IS \$50.00 orida Departme ay 1, 2003						
9.		MANAGING MEMBE	RS/N	IANAGERS	10.		·	ADDITIONS/	CHANGES			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	☐ Delete	- 1					☐ Change	Addition	E083 (10/02)
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receipter or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND OPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHO

6240

Daytime Phone #

TOPPING, KESSLER & CO.
A Partnership of Professional Associations

#L95000000105

Certified Public Accountants

Elliot S. Kessler, C.P.A. David T. Topping, C.P.A. Jerome J. Topping, C.P.A. Sheridan Hills Professional Plaza 4020 Sheridan Street, Suite C Hollywood, Florida 33021 Broward (954) 983-5800 Fax (954) 983-0001 FL (800) 273-4524

June 25, 2003

Florida Department of State Limited Liability Company Division of Corporations P.O. Box 6478 Tallahassee, Florida 32314-6478

RE:

Allied Research Company, L.C.

L95000000105

Dear Sir or Madam:

We are responding on behalf of the above Florida Corporation. Please accept this delinquent 2003 Uniform Business Report and a check in the amount of \$50 to keep the corporation current.

I was engaged by the Company to perform certain tax and accounting services. The owner has been out of town and a new bookkeeper was also recently hired. It was only after my review of some of the files that we noticed that the Uniform Business Report was not yet filed for 2003. The owner immediately signed the report and wrote the appropriate check which we are sending to you now. This delinquency will not happen in the future.

We respectfully request an abatement of the additional fee due to filing the report after May 1, 2003. Thank you in advance for your cooperation in this matter.

Very truly yours,

David Topping Enclosures

CC: Alan Leigh