2002 UNIFORM BUSINESS REPORT (UBR)

Jul 09, 2002 8:00 am Secretary of State DOCUMENT # M64521 1. Entity Name 07-09-2002 90396 025 ***150.00 ART KANE ASSOCIATES, INC. Principal Place of Business Mailing Address 1512 E BROWARD BLVD 1512 E BROWARD BLVD FT. LAUD FL 33301 FT. LAUD FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0024393 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KANE, ARTHUR Street Address (P.O. Box Number is Not Acceptable) 1821 S.W. 68TH AVENUE PLANTATION FL 33317 City 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 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition KANE, ARTHUR W. NAME NAME STREET ADDRESS 1821 S.W. 68TH AVE. STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33317 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KANE, PAULINE C. NAME NAME STREET ADDRESS 1821 S.W. 68TH AVE. STREET ADDRESS PLANTATION FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-7IP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

☐ Delete

Change

Addition

FILED

60120405

Passariello & Staiano

CERTIFIED PUBLIC ACCOUNTANTS • A PROFESSIONAL ASSOCIATION

July 2, 2002

Uniform Business Report **Division of Corporations**

P.O. 1500

Tallahassee, Fl. 32302-1500

RE: Taxpayer's Name:

Document Number:

Tax Form:

Art Kane Associates, Inc. M64521

Uniform Business Report

Tax Period: 2002

Gentlemen:

We are writing as the accountants for the above referenced client.

Enclosed please find the 2002 Uniform Business Report for the above referenced taxpayer with a check in the amount of \$150.00. The taxpayer had not received the original Uniform Business Report, which was due and payable May 1, 2002. Please accept their fee in the amount of \$ 150.00 as they had always filed and paid this return timely in the past and this was an unusual and unforeseen occurrence.

If you have any questions, please feel free to call us between the hours of 9 A.M. and 5 P.M. Monday thru Friday at (954) 776-1444.

nak, C.P.A.

Sincerely,

PASSAREILLO & STAIANO, C.P.A.

Catherine Lysak, C.P.A

For the Firm

Encl