## **FILED 2001 UNIFORM BUSINESS REPORT (UBR)** Jul 10, 2001 8:00 am Secretary of State DOCUMENT # P00000011850 1. Entity Name 07-10-2001 90005 036 \*\*\*150.00 STEVE E. PROFFITT INSURANCE SERVICES INC. Principal Place of Business Mailing Address 1270 NE 27th Avenue 1270 NE 27th Avenue Pompano Beach, FL 33062 Pompano Beach, FL 33062 80059865 2. Principal Place of Business 3. Mailing Address 2703 E Oakland Pk Blvd 2703\_E Oakland Pk Blvd Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Fort Lauderdale, FL Fort Lauderdale, FL 65-0978745 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired 33306 33306 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEVE E. PROFFITT STEVE E. PROFFITT 1270 NE 27th Avenue Street Address (P.O. Box Number is Not Acceptable) Pompano Beach, FL 33062 2703 Eastt Oakland Park Boulevard <sup>City</sup> Fort L<u>auderdale,</u> 8. The above named Se of changing its registered office or registered agent, or both, in the State of Florida. Steve E. Proffitt 07/02/01 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, TITLE ☐ Delete PD NAME NAME PROFFITT, STEVE E. STREET ADDRESS STREET ADDRESS. 2703 E Oakland Park Boulevard 1270 NE 27th Avenue CITY-ST-7IP Fort Lauderdale, FL CITY-ST-ZIP Pompano Beach, FL 33062 ☐ Delete X Change TITLE Addition TITLE PROFFITT, PATRICIA NAME NAME STREET ADDRESS 1270 NE 27th Avenue STREET ADDRESS 2703 E Oakland Park Boulevard Fort Lauderdale, FL 33306 CITY-ST-ZIP CITY-ST-ZIP Pompano Beach, FL 33062 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

s of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the information supplied indicated on this report or supplement. ied with this filip of the corporation or the changed, or on an atta

TITLE

NAME

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITI F NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP TITLE

☐ Delete

☐ Delete

☐ Change

Change

☐ Addition

☐ Addition

## Steve E. Proffitt Insurance Services Inc.

2703 E. Oakland Park Boulevard • Fort Lauderdale, Florida 33306

July 2, 2001

Allowhenent Ott Powca1850 Box59865

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: Filing of 2001 United Business Report

In accordance with our conversation with your office, please accept the enclosed 2001 Annual Report and check for \$150 as payment in full for our 2001 UBR.

In reviewing our books for the first six months of 2001, our accountant informed us there was no record of a check for our 2001 UBR. As you will note by the enclosed returns, our principal place of business changed in 2000 as did our mailing address. Therefore, we did not receive our 2001 UBR report nor any notices regarding non-filing

Thank you for your consideration of this matter. We look forward to a favorable reply.

Steve E. Profitt

President :