

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000033403

1. Entity Name

Lexus Jon, Inc.

FILED

02 NOV -6 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700008836977

11/06/02--01134--005 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6930 N.W. 15th Street

Suite, Apt. #, etc.

3. Mailing Address

6930 N.W. 15th Street

Suite, Apt. #, etc.

City & State
Margate, FL

City & State
Margate, FL

4. FEI Number

65-0999152

☒ Applied For

☐ Not Applicable

Zip
33063

Country

Zip
33063

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Mirtha Movens

Street Address (P.O. Box Number is Not Acceptable)

6930 N.W. 15th Street

City

Margate

FL

Zip Code
33063

**DO NOT WRITE
IN THIS SPACE**

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

Mirtha Movens

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11-4-02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Mirtha Movens 6930 N.W. 15th Street Margate, FL 33063	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mirtha Movens

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-4-02

CR2E034B (12/01)

20f2

LASHBROOK & ASSOCIATES, P.A.
TAX ACCOUNTANTS AND FINANCIAL PLANNERS

4481 STIRLING ROAD
FT. LAUDERDALE, FLORIDA 33314-7519

BUSINESS CONSULTATION AND MANAGEMENT
FAMILY INVESTMENT, TAX, AND ESTATE PLANNING

TELEPHONE: 954-581-8112
FAX: 954-581-2554
E-MAIL: garth@lashbrookfinancial.com

GARTH D. LASHBROOK, EA, CFP, CFS, CFE, CBC
ENROLLED AGENT
CERTIFIED FINANCIAL PLANNER
ACCREDITED TAX ADVISOR
BOARD CERTIFIED BUSINESS APPRAISER
CERTIFIED FUND SPECIALIST
CERTIFIED FRAUD EXAMINER
CERTIFIED BUSINESS COUNSELOR

KENNETH STONE, EA
ENROLLED AGENT
CFP PARA-PLANNER

JOAN M. LASHBROOK
EXECUTIVE VICE PRESIDENT

MARTHA LASHBROOK
OFFICE MANAGER

MARIETTA GUIDA
ADMINISTRATIVE ASSISTANT

November 1, 2002

**Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500**

**Re: Lexus Jon, Inc.
Document # P00000033403**

To whom it may concern:

We are the accounting firm for the above referenced corporation. It has recently come to our attention that our client did not receive their 2002 UBR Report. We checked their listing on the sunbiz.org website and their address is incorrect.

Therefore, we respectfully request your department's acceptance of the enclosed 2002 UBR Report with the initial filing fee of \$ 150.00. Your immediate consideration and response is greatly appreciated.

Sincerely,

LASHBROOK & ASSOCIATES, P.A.



**Garth D. Lashbrook,
for the firm.**

GDL/ks

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