

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90007 028 ***150.00

DOCUMENT # P00000035770

1. Entity Name
RED ONIONS, INC.

Principal Place of Business
**1804 EAST 3RD AVE.
TAMPA FL 33605**

Mailing Address
**1804 EAST 3RD AVE.
TAMPA FL 33605**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3641891**

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOLAM, PETER O
1804 EAST 3RD AVE.
TAMPA FL 33605**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTS** ☐ Delete
NAME **BOLAM, PETER O**
STREET ADDRESS **906 DRUID HILLS ROAD**
CITY-ST-ZIP **TEMPLE TERRACE FL 33617**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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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.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/6-02 813/248-2615

CR2E034 (4/02)

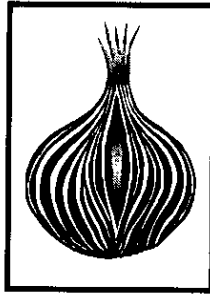
Attachment

677823

PO0000035720

Red Onions Incorporated

1804 East Third Avenue
Tampa, Florida 33605



September 6, 2002

TO: Florida Department of State

FROM: Peter Bolam

REGARDING: Uniform Business Report 2002

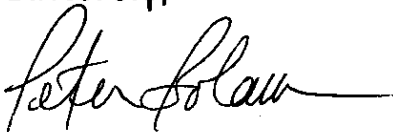
To whom it may concern:

I am writing to request that the late fee be waived on the basis that we did not receive the first notice for filing.

Red Onions was incorporated in the year 2000 and we were under the impression that the UBR's annual filing fees were normally \$550.00 and due by September 13th of each year. As a result of going to your web site today we realized that the true due date is May 1st and the actual annual fee is \$150.00. Had we received the first notice we would have filed in a more timely manner.

Thank you for your time and consideration regarding this matter.

Sincerely,



Peter Bolam