

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90151 047 ***150.00

DOCUMENT # P00000036458

1. Entity Name

M J LARSEN CONSULTING, INC.

Principal Place of Business

**1360 S. OCEAN BLVD.
 APT. 706
 POMPANO BEACH FL 33062-7165**

Mailing Address

**1360 S. OCEAN BLVD.
 APT. 706
 POMPANO BEACH FL 33062-7165**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1005551

☒ Applied For

☐ Not Applicable

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

**DIFIORE, CHRISTINE M CPA
 8220 STATE RPAD 84
 SUITE 200
 DAVIE FL 33324**

Name

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

8220 State Road 84

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.

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 12, 2001 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 ☐ Delete
 NAME **D**
 STREET ADDRESS **LARSEN, MICHAEL J J**
 CITY-ST-ZIP **1360 S. OCEAN BLVD. APT 706
 POMPANO BEACH FL 33062-7165**

TITLE ☒ Change ☐ Addition
 NAME **Apt 2706**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **LARSEN, ROSA M**
 CITY-ST-ZIP **1360 S. OCEAN BLVD. APT 706
 POMPANO BEACH FL 33062-7165**

TITLE ☒ Change ☐ Addition
 NAME **Apt 2706**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 #

9/3/01

CR2E034 (5/01)

Attachment DOC# P000000036458 A0086251
Christine M. DiFiore, C.P.A., P.A.

8220 State Road 84, Suite 200
Davie, Florida 33324

Office: (954) 693-9118
Fax: (954) 693-9208

E-Mail: cmdcpa@aol.com

September 10, 2001

Division of Corporations
Annual Reports Filing
P O Box 1500
Tallahassee, FL 32302-1500

RE: M J Larsen Consulting, Inc.
DOCUMENT #: P00000036458
FORM: Profit Corporation Annual Report
PERIOD: 2001

Dear Department of State Representative:

This letter is in response to your 2nd notice for the 2001 Profit Corporation Annual Report.

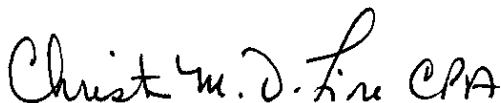
The corporation was created on April 11, 2000. I have attached a copy of the Articles of Incorporation filed and certified by your office. Please note the address as filed is correct and the address on the pre-printed form is not. Due to the incorrect mailing address, the corporation never received the first notice from the Department of State. Please make the necessary changes on your system to correct this mistake.

I respectfully request abatement of the \$400 in additional fees due to this error. I have enclosed check #1077 in the amount of \$150.00 to cover the original annual filing fee.

Please consider this request and notify the corporation of any changes.

If you should have any questions, comments, or concerns, please do not hesitate to give me a call.

Sincerely,

Christine M. DiFiore CPA

Christine M. DiFiore, C.P.A.

cc: M.J. Larsen Consulting, Inc.

Attachment DOC# P000000310458
ARTICLES OF INCORPORATION
(Professional Corporation)
OF
M J LARSEN CONSULTING, INC.

FILED
APR 11 AM 11:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME OF CORPORATION

The name of this corporation shall be M J LARSEN CONSULTING, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal address of this corporation shall be:

1360 S. Ocean Blvd., Apt #2706
Pompano Beach, Florida 33062-7165

ARTICLE III - NATURE OF BUSINESS

The general nature of the business to be transacted by this corporation is to engage in any and all business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - DURATION

This corporation shall have a perpetual existence, unless sooner dissolved in accordance with the law of the State of Florida. The date on which corporate existence shall begin is the date of subscription and acknowledgment of these Articles of Incorporation.

ARTICLE V - CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to issue and have outstanding at any one time is Ten Thousand (10,000) shares. Such shares shall be of a single class known as Common Stock, and shall have a par value of One Cent (\$ 0.01) per share.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 8220 State Road 84, Suite #200, Davie, Florida 33324. The name of the initial registered agent of this corporation at that address is Christine M. DiFiore, C.P.A.

This corporation shall have an initial Board of Directors of Two (2). The number of directors may be either increased or diminished from time to time but the number shall, subject to ARTICLE IX below, never be less than One (1) nor more than Five (5). The name and addresses of the initial directors for this corporation is:

NAME:

ADDRESS:

Michael J. Larsen

1360 S. Ocean Blvd., Apt #2706
Pompano Beach, Florida 33062-7165

Rosa Monroy Larsen

1360 S. Ocean Blvd., Apt #2706
Pompano Beach, Florida 33062-7165

ARTICLE VIII - INCORPORATOR

The name and address of the person signing of these Articles of Incorporation is:

NAME:

ADDRESS:

Christine M. DiFiore

8220 State Road 84
Suite 200
Davie, Florida 33324

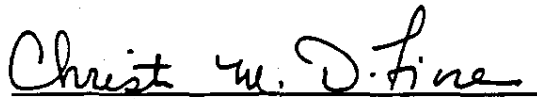
ARTICLE IX - MANAGEMENT OF CORPORATION BY STOCKHOLDERS

Anything to the contrary contained in these Articles of Incorporation notwithstanding, if the Shareholders of this corporation shall so elect, they may exercise all powers and conduct the business and affairs of this corporation in lieu of the Board of Directors.

ARTICLE X - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation on this 6th day of April, 2000.


Christine M. DiFiore - Incorporator

Attachment Doc# P00000036458 A6086354

STATE OF FLORIDA }
 } SS:
COUNTY OF BROWARD }

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Christine M. DiFiore known to me to be the person who executed the foregoing Articles of Incorporation, and she acknowledged before me that she executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hands and affixed my official seal in the State and County aforesaid, this 6th day of April, 2000.

My Commission Expires:



Aileen Russell

NOTARY PUBLIC

Attachment Doc# 200000036458 A0086354
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida Statutes, the following is submitted:

M J LARSEN CONSULTING, INC.

FIRST - That desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 1360 S. Ocean Blvd., Apt #2706, City of Pompano Beach, County of Broward, State of Florida has named Christine M. DiFiore located at 8220 State Road 84, Suite #200, Town of Davie, County of Broward, State of Florida, 33324, as its agent to accept service of process within this state.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper performance of my duties.

Christine M. DiFiore

Christine M. DiFiore

4/6/00

Date

FILED
00 APR 11 AM 11:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA