


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

FILED
Jul 31, 2003 8:00 am
Secretary of State

07-31-2003 90071 028 ***150.00

DOCUMENT # P00000038219	
1. Entity Name BOOKOUT AND ASSOCIATES, INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 228 NE 16th Terrace	3. Mailing Address 228 NE 16th Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Ft. Lauderdale FL	City & State Ft. Lauderdale FL	4. FEI Number 65-1059428	Applied For <input type="checkbox"/> Not Applicable
Zip 33301	Country US	Zip 33301	Country US
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Patricia Bookout**
Street Address (P.O. Box Number is Not Acceptable)
228 NE 16th Terrace
City **Ft. Lauderdale** FL Zip Code **33301**

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Patricia Bookout 228 NE 16th Terrace Ft. Lauderdale, FL 33301
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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Patricia Bookout**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 25, 2003 **954-764-**
Date Daytime Phone #

CR2E034B (12/02)

Attachment
86134973
P00000038219
Bookout and Associates, Inc.

228 N. E. 16th Terrace
Fort Lauderdale, Florida 33301
Telephone/Fax 954.764.8844

July 25, 2003

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern,

I did not receive the Notice of 2003 Profit Corporation Uniform Business Report. I was informed by my CPA that I should have received sometime the first of the year. I then requested one on July 18 and just received.

Please waive any late fee. I am fairly new in business and I am still not familiar with all the necessary paperwork.

Thank you for your assistance.

Sincerely,



Patricia Bookout
Bookout and Associates, Inc.