

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000071613

1. Entity Name  
CUSTOM UPHOLSTERY BY PHILLIP & SONS, INC.

**FILED**  
**Jun 27, 2002 8:00 am**  
**Secretary of State**

06-27-2002 90184 042 \*\*\*150.00

Principal Place of Business

4757 NW 103 AVENUE  
SUNRISE FL 33351

Mailing Address

4757 NW 103 AVENUE  
SUNRISE FL 33351

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

65-1034525

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

RENISOFF, PHILLIP  
4757 NW 103 AVENUE  
SUNRISE FL 33351

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.

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 \$150.00**  
After May 1, 2002 Fee will be \$550.00  
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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTSD  
RENISOFF, PHILLIP  
4757 NW 103 AVENUE  
SUNRISE FL 33351 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHILLIP Reniso

4-20-02

Date

954-772-8080

Daytime Phone #

CR2E034 (9/01)

BUSINESS ACCOUNTING INC.

3500 N. STATE RD. 7, SUIT 437, LAUDERDALE LAKES, FL 33319

TELEPHONE: (954) 714-8764 FAX: (954) 714-7986

*Attachment*  
*#P00000071613*  
*118601*

June 20, 2002

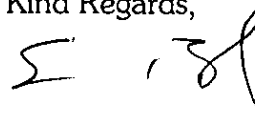
Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: Late Filing Notice

Dear-Sir or Madam:

My client timely mailed the original 2002 Uniform Business Report back in April of this year. The check has never cleared the bank so we are enclosing a copy of the original report and a new check.

Kind Regards,



Edward Alan Brian, Esq.