

02 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 DEC 30 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000074809**

1. Entity Name
SBHY ENTERPRISES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

PO Box 800-145

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 800 145

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

AVENTURA FL

City & State

AVENTURA

4. FEI Number

65-1032913

Applied For

Not Applicable

Zip

33180

Country

Zip

33180

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SIMON BEN-HAIM

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

1100 COLLINS AVE

City

MIAMI BEACH

FL

Zip Code
33139

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 (required)

(NOT: Registered Agent signature required when reappointing)

DATE

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 \$650.00

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
**P
SIMON BEN-HAIM
PO Box 800-145
AVENTURA FL 33180**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**000009745920
12/30/02--01093--011 **150.00**

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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/19/02 305-321-3151

CR2E034B (12/01)

2/13

LESLIE E. DOLIN PA, CPA

5285 SW 38 AVE.
FT. LAUDERDALE, FL 33312

Phone 954-965-4666
Fax 954-965-4665

December 27, 2002

Division Of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: SBHY Enterprises Inc.

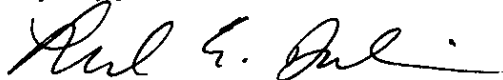
Dear Sir or Madam:

Please find enclosed the 2002 Annual Report for the above corporation along with a check for \$150 payable to you for the annual filing fee.

On behalf of the above corporation I hereby request that you waive the \$400 late filing penalty required for reports filed after May 1, 2002. I was recently hired as the accountant for this corporation and was informed by the owner/president Simon Ben-Haim neither mailing of the report was received by him, as the corporation moved at the beginning of the year and has had major problems in getting mail forwarded from their old address. Further, Mr. Ben Haim was out of the country most of the year. Upon discovering he was delinquent in filing the report and realized the corporation had been dissolved, Mr. Ben-Haim immediately advised me of the situation and I am herewith attempting to resolve this matter in the best and fairest way possible considering the circumstances. Please note that the corporation is experiencing great financial difficulties and that any penalties imposed would cause undue hardship at this time.

Mr. Ben-Haim and myself appreciate your kindness and consideration in this matter.

Very truly yours,



LESLIE E. DOLIN, CPA