

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

FILED

02 NOV 20 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000086644

1. Entity Name

SPACENEWSSTATION.COM CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10001 NW 50 STREET

Suite, Apt. #, etc.

204

City & State

SUNRISE, FL

Zip

33351

Country

USA

3. Mailing Address

10001 NW 50 STREET

Suite, Apt. #, etc.

204

City & State

SUNRISE, FL

Zip

33351

Country

USA

4. FEI Number

65-1041204

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
DANIEL G. GASS

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

10001 NW 50 STREET

SUITE 204

City

SUNRISE

FL

Zip Code
33351

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

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
D
NAME
ROBERT E. GASS
STREET ADDRESS
10001 NW 50 STREET #204
CITY-ST-ZIP
SUNRISE, FL 33351

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000004088060
11/20/02-01001-004 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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)(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 on an attachment with an address, with all other persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT E. GASS

11/07/02

Date

(954) 741-2389

Daytime Phone #

CR2E034B (12/01)

W. B. D. Accounting, Inc.

10001 N.W. 50th Street
Suite 204
Sunrise, FL 33351

(954) 746-0156
Fax: (954) 746-7690

November 7, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

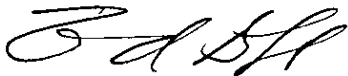
RE: SPACENEWSSTATION.COM CORP.
FEIN: 65-1041204

Dear Sir/Madam:

Please be advised that we represent the above-referenced client. Upon review of our records, we found that our client never received his Uniform Business Report. Immediately on learning of this, our client called your office and was told to submit a Report with a check for \$150.00 and a letter requesting a one-time exemption of waiver for the reinstatement fee.

To this end, we enclose the UBR and a check for this amount. We thank you for your attention to this matter and for your indulgence in this case. If you have any questions, or need additional information, please contact us.

Very truly yours,
WBD ACCOUNTING, INC.



David B. Lanter, CPA

DBL:tb

Enclosures

cc: Client