

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90236 024 ***150.00

DOCUMENT # P00000096157
1. Entity Name SQUARE DESIGN, INC.

Principal Place of Business 21611 PALM AVE. PANAMA CITY BEACH FL 32413	Mailing Address 21611 PALM AVE. PANAMA CITY BEACH FL 32413
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3669687	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HUDLOW, JASON 21611 PALM AVE. PANAMA CITY BEACH FL 32413	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (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. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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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: JASON W HUDLOW **8/29/02** **850 527 1416**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment

SQUARE DESIGN, INC.

000000896157

August 29, 2002

Florida Department of State
Divisions of Corporations
P.O.B. 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

This letter is in regards to the late notice received for my UBR 2002 for Square Design, Inc. At this time I wish to state that I did not receive the first notice issued. Both my wife and I have looked for this notice and have not found it.

With all respects I wish to refer to Frequently Asked Questions # 8 where it asks "can the late fee be waived?" At this time I am respectfully requesting your consideration for this action.

I received notification in the later half of June that the filing of my UBR 2002 was past due. The sum of \$ 550.00 is a considerable sum to me as I am only a very small company.

Find enclosed a check for the original \$ 150.00 and appropriate filing form.

If you have any questions please call me at 850-235-9052 evenings and 850-527-1416 daytime.



Jason Hudlow
President