## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Sep 06, 2001 8:00 am

50.00

DOCUMENT # PO(  1. Entity Name	0000104561	Secretary of			
SUPREME HANDICRAFT, INC.		71	08-08-2001 90141 0	)42 *	
rincipal Place of Business 77 SW 1887H TERRACE EMBROKE PINES FL 33029	Mailing Address 377 SW 188TH TERRACE PEMBROKE PINES FL 3302	9	- A MATINIAN IN DENN BENN BENN BENN BENN BRUK HANDE HERN BRUK BRUK BRUK HAND.	1201	
Principal Place of Business	3. Mailing Address	<del></del>			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State	City & Slate		4.5EI Number   Applied Fo   Applied Fo   Not Applied Fo	_	
Zip Country	Zip	Country	5. Certificate of Status Desired		
6. Name and Address of Current Registered Agent		Name	7. Name and Address of New Registered Agent	$\exists$	
SADRUDDIN, SULEMAN 377 SW, 188TH TERRACE			Street Address (P.O. Box Number is Not Acceptable)		
PEMBROKE PINES FL 33029	The state of the s	City	<b>□</b> Zip Code	اسيدو	
	<del></del>	<u></u>	FL Zip Code		
This corporation is eligible to satisfy its In     Tax filing requirement and elects to do so     (See criteria on back)  OFFICEF			\$750.00 Touri Fund Contribution Added to Fee	Be	
I PRESTOR		- HILE:	Change Add	dition	
ME SULEMN PRETADORESS SULEMN 2764-NW LOWARDER L	SADRUDDIN	NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	dition	
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I hereby certify that the information suppli- indicated on this report or supplemental rof the corporation or the receiver or truste changed, or on an attachment with an ad-	report is true and accurate and that my repempowered to execute this report as	cmy-st-zip  the exemption stated in signature shall have a required by Chapter	in Section 119.07(3)(i), Florida Statutes, I turther certify that the information the same legal effect as if made under oath; that I am an officer or directer 807, Florida Statutes; and that my name appears in Block 11 or Block 15	on tor 2 if	
GNATURE: SIGN	axure bequire	ED	Hw/ ca /950)605-5270	<u>o</u> .	
SIGNATURE AND TY	PED OR PTINTED NAME OF SIGNING OFFICER OR	DIRECTOR	Date Daytime Phone #	1	

Altachnest 12101

Die. # 200000104561

SUPREME HANDICRAFT INC

2764 NW 30<sup>TH</sup> WAY, LAUDERDALE LAKES, FL 33311

Phone: 954-605-5270 Fax: 954-796-0662

-Dear Sir/Madam: -

Enclosed please find the Uniform Business report for our company. This is the first correspondence that we have received from you. This indicates a fine of \$400. It seems like your prior correspondence has been crossed in the mail. This is a new company and we did not know what to expect the first year.

I hope you would be kind enough to consider and excuse us for the first and last time, as we were unaware of the filing procedure. I am enclosing \$150.00. If you think that we should still pay the fine. Please let us know.

Thanks in anticipation,

Sincerely

Suleman Sadruddin

President