

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 24, 2001 8:00 am
Secretary of State

08-24-2001 90006 018 ***150.00

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DOCUMENT # P00000107934

1. Entity Name
ALLEXECs, INC.

Principal Place of Business
12640 NORTHWEST 13TH STREET
SUNRISE FL 33323

Mailing Address
12640 NORTHWEST 13TH STREET
SUNRISE FL 33323



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1059544

Applied For

Not Applicable

Zip

Country

Zip

Country

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

JOY, MONIQUE
12640 NORTHWEST 13TH STREET
SUNRISE FL 33323

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
D
JOY, MONIQUE
12640 NORTHWEST 13TH STREET
SUNRISE FL 33323

☐ Delete

TITLE
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☐ 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:

Monique A. Joy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/15/2001

Date

954-846-1956

Daytime Phone #

CR2E034 (5/01)

Attachment

Doc. # 000000107934
C0075684

To: Secretary Of State

From: Monique Joy (President of Allexecs)

I am writing you in reference to filing the correct forms for Florida State Tax. As per conversation with the secretary at your office I am writing to explain why we did not file the papers on time.

As a new company formed in January of 2001 and sole employee of the company I was unaware that we had not Florida for state taxes. All my paper work went to my accountant, which I thought he took care of. I asked my accountant if he filed with your department and he said that we never got the paper work. When I received the Uniform Business Report Statement 2nd notice and late filing this week I went back to all my papers and legal documents and any other paper work that I got from day one from state and federal, but could not find the paper work to file.

I did have trouble with my mailbox the first month I started the company and can only assume that some how the forms to file never got into the correct hands.

I am asking for you to please consider this as the extra 400 dollars for late filing is a huge expense that could have been avoided had I received the forms or even been aware that I had not filed.

I am sending the check for 150 dollars and hope that you will provide an exception, as a new corporation I am learning and made an honest mistake. The cost of filing late will only add to the hardship I have faced in these economic times.

Thank you,

Monique Joy
President Allexecs Inc.

