

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2002 8:00 am
Secretary of State

08-18-2002 90129 024 ***150.00

DOCUMENT # P01000009573

1. Entity Name
PARSE INTERNATIONAL, INC.

Principal Place of Business
369 MOORINGS COVE DRIVE
TARPON SPRINGS FL 34689

Mailing Address
369 MOORINGS COVE DRIVE
TARPON SPRINGS FL 34689



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
369 MOORINGS COVE DR
 Suite, Apt. #, etc.

3. Mailing Address
369 MOORINGS COVE DR.
 Suite, Apt. #, etc.

City & State
TARPON SPRINGS, FL
 Zip
34689
 Country
USA

City & State
TARPON SPRINGS, FL
 Zip
34689
 Country
USA

4. FEI Number
59-3694250

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SCOTT, BERNARD E
369 MOORINGS COVE DRIVE
TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 13, 2002 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

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
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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: **SIGNATURE REQUIRED** 7/15/02 727 938 8416
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachments

974853

P01000009573

Parse International, Inc
369 Moorings Cove Dr.
Tarpon Springs, FL 34689
727-938 8416
bud.scot@verizon.net

August 13th, 2002

Florida Department of State
Division of Corporations

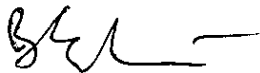
Re: Parse International, Inc. 2002 Uniform Business Report

Sirs/Madams:

Enclosed please find my UBR for 2002 and a check in the amount of \$150. dollars. I respectfully request an abatement of the \$400 late filing penalty fee, because of the following mitigating circumstances. I am 73 years old, and had major surgery last year and again this year. My S Corporation, Parse International, Inc., has become inactive and has had zero business or revenues this year. It was my expectation to close down the business, due to health and other reasons, which is why I did not file the UBR in timely fashion. Now however, my health is somewhat improved (I am 73) and I would like to keep the company alive to see what might happen business-wise. It would help me very much if I could be excused from the penalty fee.

Thank you very much for your consideration.

Yours truly,



Bernard Scott

President,

Parse International, Inc.