

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 02, 2002 8:00 am
Secretary of State

10-02-2002 90119 045 ***150.00

DOCUMENT # P01000009947

1. Entity Name

KIPER SALES, INC.

Principal Place of Business

7522 WILES RD., SUITE 112
 CORAL SPRINGS FL 33067

Mailing Address

7522 WILES RD., SUITE 112
 CORAL SPRINGS FL 33067

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-1069714

Applied For

Not Applicable

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

KIPER, MICHAEL T

7522 WILES RD., SUITE 112

CORAL SPRINGS FL 33067

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

TITLE PSD ☐ Delete
 NAME DRISCOLL, BONNIE B
 STREET ADDRESS 7522 WILES RD., SUITE 112
 CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VTD ☐ Delete
 NAME KIPER, MICHAEL T
 STREET ADDRESS 7522 WILES RD., SUITE 112
 CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL T KIPER

9/27/02

954-857-5489

CR2E034 (4/02)

Attachment

678707
PD/00009947

To. Whom it may concern:

I Michael T. Kiper am writing to advise that
I never recieved a first notice for U.B.R.
recieved this one on Sept 27. 02 and called the #
enclosed is a check for 150- as instructed by
the female I spoke with on the phone 9/27/02

Thank you



Michael T. Kiper
UTD
Kiper Sales Inc.
7522 Wiles Rd # 112
Coral Springs FL 33047