2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100009972 1. Entity Name ALBERT J. HADEED, P.A. Principal Place of Business 104 SOUTH FOURTH STREET PO BOX 190 FLAGLER BEACH FL 32136 FLAGLER BEACH FL 32136-0190						FILED 02 OCT 25 PM 12: 50 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business 3. Mailing Address										
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			\dashv	DO NOT WRITE IN THIS SPACE				
City & State		City & State				El Number 2 - 3816228		\rightarrow	plied For t Applicable	
Zip	Country	Zip	Count	ry		Certificate of Status Desired	□ \$8.	75 Add Required	litional	
	6. Name and Address of Current F	Registered Agent		Name	7. N	lame and Address of New Re	gistered Ager	nt	•	
HADEED, ALBERT J 104 SOUTH FOURTH STREET FLAGLER BEACH FL 32136				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 significance required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00										
Tax filing red (See criteria	quirement and elects to do so.	After September 13, 2002 Fee will be \$750. Make Check Payable to Department of Sta			State	10. Election Campaign Final Trust Fund Contribution.		Ådded	May Be to Fees	
NAME STREET ADDRESS	OFFICERS AND D HADEED, ALBERT J 104 SOUTH FOURTH STREET FLAGLER BEACH FL 32136	DIRECTORS Delete		1		DITIONS/CHANGES TO OFFIC 10000859 10/25/02011081				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						Change	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: SIGNATURE:										

386-439-7828

Albert J. Hadeed, P.A. P.O. Box 190 Flagler Beach, FL 32136-0190

Voice: (386) 439-7828 Fax: (386) 439-2718

October 21, 2002

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Ladies and Gentlemen:

Attached is my completed 2002 Uniform Business Report. I did not receive the notice about the Report filing. I received the late notice associated with this mailing but on receipt set it aside in a folder, as I was traveling to Virginia for an extended time. My mother in Virginia was hospitalized and, as the oldest son, I had to attend to her medical and financial situation and her now vacant home. I lost my father a year ago and as a recent widow my Mom was unable to take care of a lot of her affairs. I oversaw her transfer to a rehabilitation facility following the period of hospitalization, but on return to Florida I had forgotten about the form.

I have just relocated it as I was cleaning out some folders. I am the sole employee of the corporation and I relied on my memory to complete it when I returned from Virginia. I failed to remember. My sincere apologies.

I do not know from the instructions if I am eligible for the waiver of the late fee. This is the first time I have been a corporation that is obligated to file annual forms. I would appreciate any consideration you could extend in this early part of the corporation's existence. I am now forewarned and have calendared next year's renewal so I am not dependent on receipt of the form. Thank you for your consideration.

Sincerely,

Albert J. Hadeed, President