

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT #

P01000015750

1. Entity Name

We R Five, Inc

03 SEP -5 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 UBR

DO NOT WRITE IN THIS SPACE

800022789458

09/05/03--01031--004 **300.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1241 Peregrine Way

3. Mailing Address
1241 Peregrine Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Weston

FL

Weston

FL

4. FEI Number

65-1080335

Applied For

Not Applicable

Zip

Country

Zip

Country

33327

33327

5. Certificate of Status, Desired ☐

\$8.75 Additional

Fee Required

7. Name and Address of Current Registered Agent

Name

Harbatkin, Robert

Street Address (P.O. Box Number is Not Acceptable)

1241 Peregrine Way

City

Weston,

FL

Zip Code

33327

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)

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
Harbatkin, Robert
1241 Peregrine Way
Weston, FL 33327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STD
Harbatkin, Susan
1241 Peregrine Way
Weston, FL 33327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment #

July 03, 2003

P01000015750

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


RE: We R Five, Inc.

Doc #P01000015750

2003 Uniform Business Report

The above referenced corporation did not receive the 2003 UBR. Enclosed is a check in the amount of \$150.00 representing the original filing fee. This corporation cannot afford to stay in business should it be paying any additional penalties. We respectfully request that you accept the \$150.00 to keep this corporation active and apologize for any inconvenience we have caused.

Sincerely,



Robert Harbatkin