

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

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

06-18-2002 90484 047 ***150.00

DOCUMENT # **P01000017419**

1. Entity Name

Ascendovations Incorporated

869303

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4371 White Pine Ave

Suite, Apt. #, etc.

3. Mailing Address

4371 White Pine Ave.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3701801

Applied For

Not Applicable

Zip

32811

Country

USA

Zip

32811

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Gaidi Hartage

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

4371 White Pine Ave.

City

Orlando

FL

Zip Code

32811

**DO NOT WRITE
IN THIS SPACE**

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

Gaidi Hartage (change of registered office)

6/1/02

Signature, typed or printed name of registered agent and fee 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
**P
Gaidi Hartage
4371 White Pine Ave.
Orlando, FL 32811**

TITLE
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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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Gaidi Hartage
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/1/02 407-234-3246

Daytime Phone #

CR2E034B (12/01)

Attachment

869303

PB 600017419

Request for Uniform Business Report Late Fee Waiver

To Whom It May Concern,

I am writing to request a waiver on Uniform Business Report(UBR) late fees accessed by Ascendovations Inc. Due to complications in address change information we were unable to receive proper UBR filing documents. The new address for Ascendovations Inc is 4371 White Pine Avenue Orlando, FL 32811. Late fees of \$400 would be significant to a one-year small business corporation such as mine. Ascendovations Inc. apologizes for any inconvenience this has caused to the Department of State's Divisions and Corporations and we will do our best to prevent this problem in future UBR filings. I have included the proper UBR forms for filing and payment of \$150 for filing fees. If you have questions please do not hesitate to call me at 407-234-3246.

Thank You,



Gaidi Hartage
President
Ascendovations Inc.