## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) P01000021887 DOCUMENT #

1. Entity Name







FILED

Jul 17, 2003 8:00 am Secretary of State

07-17-2003 90026 011 \*\*\*150.00

Principal Place of Business Mailing Address 3601 NW 84TH TERR 3601 NW 84TH TERR CORAL SPRINGS FL 33065 **CORAL SPRINGS FL 33065** 2. Principal Place of Business 3. Mailing Address "2749 N.W. 13 TH MANOR Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 65-1085519 Not Applicable ORAL ORAL Country \$8.75 Additional 5. Certificate of Status Desired 33001 Fee Required 330 D I 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HOLMES, SAM Street Address (P.O. Box Number is Not Acceptable) 3601 NW 84TH TERR **CORAL SPRINGS FL 33065** Zip Code **33**のフ/ 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registers agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE Delete TITLE HOLMES, SAM NAME NAME 3601 NW 84TH TERR STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. QUISTANIEL F. HOMES 7/15/03 954-755-2401 SIGNATURE:

Attachment

Gerald M. Pepper & Associates, P.A.

## **Certified Public Accountants**

MEMBER

American Institute of Certified Public Accountants Florida Institute of Certified Public Accountants New York State Society of Certified Public Accountants 90143690

Colonial Place, Suite 114 1515 University Drive Coral Springs, Florida 33071 (954) 755-5007

JULY 15, 2003

UNIFORM BUSINESS REPORT DIVISION OF CORPORATIONS PO BOX 1500 TALLAHASSEE FL 32302

RE: SEH MANAGEMENT COMPANY INC. (P01000021887)

GENTLEMEN:

ENCLOSED IS THE 2003 UNIFORM BUSINESS REPORT OF THE SUBJECT CORPORATION. MY CLIENT NEVER RECEIVED THE ORIGINAL NOTICE DUE TO HIS ADDRESS CHANGE. HAD HE RECEIVED THE ORIGINAL NOTICE, THE REPORT ALONG WITH THE FILING FEE WOULD HAVE BEEN SENT IN TIMELY.

MY CLIENT IS A RELATIVELY NEW BUSINESS AND IT WOULD BE A FINANCIAL HARDSHIP TO HAVE TO PAY THE PENALTY. ACCORDINGLY ENCLOSED IS THE ANNUAL REPORT, ALONG WITH THE FILING FEE OF \$150.00. IT IS THEREFORE RESPECTFULLY REQUESTED THAT THE PENALTY BE ABATED AND THE ANNUAL REPORT BE ACCEPTED AS FILED.

VERY TRULY YOURS,

GERALD M. PEPPER & ASSOCIATES PA

GERALD M. PEPPER CPA