

2002 UNIFORM BUSINESS REPORT (UBR)

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

09-02-2002 90149 035 ***150.00

DOCUMENT # P01000023572

1. Entity Name
DMW ENTERPRISE, INC.

Principal Place of Business

**63 BARKLEY CIRCLE SUITE 100
 FORT MYERS FL 33907**

Mailing Address

**63 BARKLEY CIRCLE SUITE 100
 FORT MYERS FL 33907**

2. Principal Place of Business

3. Mailing Address

16400 HEALTH PARK COMMONS DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FT MYERS, FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip

Country

33918

USA

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

LEWIS, SUSAN

**63 BARKLEY CIRCLE SUITE 100
 FORT MYERS FL 33907**

Name

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

16400 HEALTH PARK COMMONS DR.

City

FT MYERS

FL

Zip Code

33918

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 ☐ Delete
 NAME **D LEWIS, JEFFREY W MD**
 STREET ADDRESS **63 BARKLEY CIRCLE SUITE 100**
 CITY-ST-ZIP **FORT MYERS FL 33907**

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

TITLE ☐ Delete
 NAME **D LEWIS, SUSAN**
 STREET ADDRESS **63 BARKLEY CIRCLE SUITE 100**
 CITY-ST-ZIP **FORT MYERS FL 33907**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 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 REQUIRED Susan Lewis

8-1-02

239-839-5546

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

977415

PO1000023572

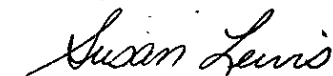
August 1, 2002

To Whom It May Concern:

I did not receive prior notice to file a 2002 Uniform Business Report for DMW Enterprise, Inc. In fact, I thought the corporation had been dissolved, as it had never commenced business.

Please consider this an official request to have the late fee waived.

Thank you,



Susan Lewis

Director

DMW Enterprise, Inc.

Encl: 2002 Uniform Business Report
Check #2729, \$150.00 filing fee