

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P01000036386

1. Entity Name

DR. SHAHRUKH T, IRANPUR, DDS, PA



FILED

03 JUL 21 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
39342 US HWY 19 N
TARPON SPRINGS FL 34689

Mailing Address
39342 US HWY 19 N
TARPON SPRINGS FL 34689

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3711313

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IRANPUR, SHAHRUKH T
39342 US HWY 19 N
TARPON SPRINGS FL 34689

Name

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 signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
IRANPUR, SHAHRUKH T
39342 US HWY 19 N
TARPON SPRINGS FL 34689

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
900021782929
07/25/03--01004--016 **150.00

☐ Change ☐ Addition

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☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/03

Date

Daytime Phone #

CR2E034 (4/03)

Page 2 of 2

Herbert C. Long, Inc.
DBA Wood & Long
Accounting, Tax Preparation and Representation
2531 Landmark Drive, Suite 205
Clearwater, Florida 33761
Phone 727-796-4504 * Fax 727-796-3673**

July 16, 2003

Mr. Tyrone Scott
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Dr. Sharukh T. Iranpur
2003 For Profit Corporation
Uniform Business Report (UBR)
Request for Abatement of Late Filing Penalty

Dear Mr. Scott:

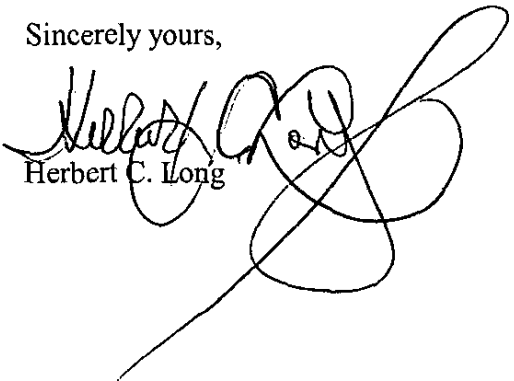
When I talked to you in the past you told me the Secretary of State would consider abating the penalty when the UBR was never received.

I have discussed the late filing of this form with Dr. Iranpur. Dr. Iranpur is a dentist in Tarpon Springs, Florida. He relies upon his administrative assistant to process his mail. During the first few months of 2003 there were personnel changes in his office. I questioned both Dr. Iranpur and his administrative assistant. They do not remember receiving the original UBR that would have been received in early 2003. Dr. Iranpur was unaware the fee had not been paid until he received the UBR with the \$400 late filing penalty. We are therefore requesting the \$400 penalty be abated.

We have enclosed the UBR and Dr. Iranpur's check in the amount of \$150.

I really appreciate your assistance in abating this late filing penalty. If you need additional information or I can answer any questions, please call me at 727-796-4504.

Sincerely yours,


Herbert C. Long