2003 FOR PROFIT CORPORATION

Aug 07, 2003 8:00 am § Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P01000043931 DOCUMENT # 08-07-2003 90123 021 ***150 00 1. Entity Name CHAMBERS DRYWALL, INC. Principal Place of Business Mailing Address 6113 12TH AVENUE SOUTH 6113 12TH AVENUE SOUTH **GULFPORT FL 33707 GULFPORT FL 33707** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3717847 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHAMBERS, JULIAN Street Address (P.O. Box Number is Not Acceptable) 6113 12TH AVE S **GULFPORT FL 33707** City Zin 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 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. PSTD Change ☐ Addition TITLE ☐ Delete TITLE CHAMBERS, JULIAN L NAME NAME 6113 12TH AVENUE SOUTH STREET ADDRESS STREET ADDRESS **GULFPORT FL 33707** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-== CITY-ST-ZIP ☐ Change Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Maddition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ■ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

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

th all و changed, or on an attachment with an address with all

Attachment.

Irving B.

Bernheim, CPA,PA

80136972 Fax (7

727)821-6278) Fax (72**7**)565-0126

735 Arlington Avenue North Suite 104 St. Petersburg, FL 33701

August 5, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

RE:

CHAMBERS DRYWALL, INC.

Document #P0T000043931

Dear Sir or Madam:

I am writing at the request of corporation named above.

Enclosed is a check for \$150, representing the annual report fee for the year 2003.

We respectfully request that you not charge a penalty based upon reasonable cause: The company was newly incorporated in 2001, and was unaware they needed to file this report until they received the blank report in the mail in July 2003. They did not receive the initial form earlier in the year. Normally they rely upon my office to assist them with their tax return filings, but my office does not usually assist with the preparation of the report.

Upon receiving the late notice, they immediately filed the report and issued a check for the annual for the fee.

Thank you for your consideration in this matter.

Yours very truly,

Irving Bernheim