

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90100 049 ***150.00

01000000 AT

DOCUMENT # P01000061924

1. Entity Name

BELES & COMPANY CUSTOM DECORATING/DRAPERIES, INC



Principal Place of Business
**2901 HERMITAGE BOULEVARD
VENICE FL 34292**

Mailing Address
**2901 HERMITAGE BOULEVARD
VENICE FL 34292**

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 **65-1119566**

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

**BELES, BRYAN
2901 HERMITAGE BLVD.
VENICE FL 34292**

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 **P** ☐ Delete
NAME **BELES, BRYAN**
STREET ADDRESS **2901 HERMITAGE BOULEVARD**
CITY-ST-ZIP **VENICE FL 34292**

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

TITLE **S** ☐ Delete
NAME **BELES, BARBARA**
STREET ADDRESS **2901 HERMITAGE BOULEVARD**
CITY-ST-ZIP **VENICE FL 34292**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/20/03

941/486-1825

Date

Daytime Phone #

CR2E034 (4/03)

Attachment
Beles & Company

80140901
#P010000061924

August 20, 2003

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

In reviewing the 2003 Uniform Business Report, under the frequently asked questions section, it states that the late fee can be waived because the corporation did not receive the prior notice.

Our corporation is a small business run by myself and my husband. Neither one of us received the prior notification or it would have been taken care of immediately. We have no intention of dissolving or revoking or corporation in the state of Florida.

Please accept the original filing fee of \$150.00, and waive the late fee. Thank you for consideration in this matter.

Sincerely,

Barbara Beles

Barbara Beles
Secretary/Treasurer
Enc.

blb