

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 24, 2003 8:00 am
Secretary of State

06-24-2003 90011 041 ***150.00

DOCUMENT # P01000076927

1. Entity Name
NAPLES ORTHODONTICS, INC.

Principal Place of Business
**2620 S UNIVERSITY DRIVE #312
DAVIE, FL 33328**

Mailing Address
**2620 S UNIVERSITY DRIVE #312
DAVIE, FL 33328**

2. Principal Place of Business
8465 SW 42nd Ct
Suite, Apt. #, etc.

3. Mailing Address
8465 SW 42nd Ct
Suite, Apt. #, etc.

City & State
DAVIE, FL
Zip
33328
Country
USA

City & State
DAVIE Florida
Zip
33328
Country
USA

4. FEI Number
65-1132783

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

ALLEN, SCOTT R
2620 S UNIVERSITY DRIVE #312
DAVIE, FL 33328
8465 SW 42nd Ct
DAVIE, FL 33328

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 date if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ALLEN, SCOTT R
2620 S UNIVERSITY DRIVE #312
DAVIE, FL 33328

☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ALLEN, SCOTT R
8465 SW 42nd Court
DAVIE, FL 33328

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott Allen, DDS

Date

June 16/03

Daytime Phone #

754-577-5703

CR2E034 (10/02)

Attachment
90140208
PO1000076927

June 16, 2003

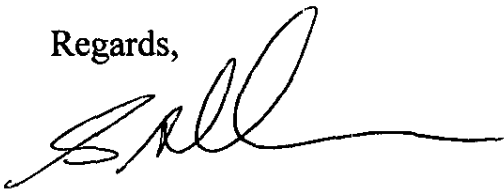
To whom it may concern,

I understand that the filing for the Uniform Business Report (UBR) was due on May 1st, however I did not receive the renewal forms in the mail like I did last year. I was still looking for them in the mail until my accountant reminded me last week that I should have received them several months ago. I have moved since last year and would imagine that the forms did not reach me due to the change in address.

I had renewed last year and the only reason I'm filling late this year was due to the aforementioned circumstances. When I called to inquire as to what to do, I was told to explain why I hadn't paid before May 1st and to enclose a downloaded and completed UBR form from the internet and a check for \$150.00 to cover the renewal fee. I hope that this covers all the fees associated with the UBR. If you require any further information, please do not hesitate to call me at (954) 577-5703 or email me at sallendds@yahoo.com.

Thank you very much for your time and consideration.

Regards,



Scott Allen, DDS
Naples Orthodontics, Inc.
8465 SW 42nd Court
Davie, Florida
33328