

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 26, 2002 8:00 am
Secretary of State

08-26-2002 90063 028 ***150.00

DOCUMENT # P01000086331

1. Entity Name

MCDONALD A-Z ENTERPRISES INC.

Principal Place of Business

**4880 HAWKES BLUFF AVE.
 DAVIE FL 33331**

Mailing Address

**4880 HAWKES BLUFF AVE.
 DAVIE FL 33331**

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

52-2341368

Applied For

Not Applicable

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

MCDONALD, JEFFREY

4880 HAWKES BLUFF AVE.

DAVIE FL 33331

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

Jeffrey McDonald
 Signature, typed or printed name of registered agent and title if applicable.

JEFFREY S. MCDONALD

August 23/2002

(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 **D** ☐ Delete
 NAME **MCDONALD, JEFFREY**
 STREET ADDRESS **4880 HAWKES BLUFF AVE.**
 CITY-ST-ZIP **DAVIE FL 33331**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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:

Jeffrey S. McDonald
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY S. MCDONALD

August 23/2002

CR2E034 (4/02)

Attachment

McDonald A-Z Enterprize
4880 Hawkes Bluff Ave
Davie, Florida 33331
Ph 954-680-3236
Fax 954-252 5468

Aug.20 2002

PO1000086331
124373

Florida Dept. of State
Division of Corporations
Secretary of State

We are requesting the waiver of the late fee for our corporation, due to the fact we did not receive our prior notification. Being a new corporation we were not aware of filing dates, without the Uniform Business report.
Enclosed is check for our annual filing fee.

Sincerely, *Jeffrey McDonald*

Jeffrey McDonald
President
A-Z Enterprize