

# 2002 UNIFORM BUSINESS REPORT (UBR)

7/9.

**FILED**  
**Jul 25, 2002 8:00 am**  
**Secretary of State**

07-09-2002 90379 031 \*\*\*150.00

**DOCUMENT # P01000087035**

1. Entity Name  
**SEMINOLE IMAGING PRODUCTS INC.**

Principal Place of Business  
**706 TEAL LANE**  
**ALTAMONTE SPRINGS FL 32701**

Mailing Address  
**706 TEAL LANE**  
**ALTAMONTE SPRINGS FL 32701**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**593743322**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ALEXANDER, PIERRE**  
**706 TEAL LANE**  
**ALTAMONTE SPRINGS FL 32701**

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 *Pierre Alexander*

(NOTE: Registered Agent signature required when reinstating)

DATE

*7/22/02*

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**

OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO</b> <b>ALEXANDER, PIERRE</b> <b>706 TEAL LANE</b> <b>ALTAMONTE SPRINGS FL 32701</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ALEXANDER, PIERRE</b> <b>706 TEAL LANE</b> <b>ALTAMONTE SPRINGS FL 32701</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>ALEXANDER, KIRSTEN</b> <b>706 TEAL LANE</b> <b>ALTAMONTE SPRINGS FL 32701</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: *Pierre Alexander*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*7/02/02*

CR2E034 (4/02)

Attachment # PO1000087035 [REDACTED]

39667

SEMINOLE IMAGING PRODUCTS, INC.  
706 TEAL LANE  
ALTAMONTE SPRINGS, FL 32701

July 2, 2002

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

Re: Seminole Imaging Products, Inc.  
Document # PO1000087035

Gentlemen:

This corporation was formed in the month of September, 2001 - and 2002 is our first full year of business.

We did not receive the first UBR report form, which had a May 1, 2002 due date. Therefore we are filing the report form that we just received, and ask that you please accept our check for \$150.00 and abate the penalty of \$400.00. It would be greatly appreciated if you would do this.

Thank you.

Very truly yours,



Pierre Alexander

PA:mt

FEI # 593743322