## 2002 UNIFORM BUSINESS REPORT (UBR)

## Sep 02, 2002 8:00 am Secretary of State P01000094284 **DOCUMENT #** 1. Entity Name 09-02-2002 90144 035 \*\*\*150.00 GUS ' AUTO MACHINE, INC. Principal Place of Business Mailing Address 411B NE 3 STREET 411B NE 3 STREET **BOYNTON BEACH FL 33435** BOYNTON BEACH FL 33435 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARBEE, GUS Street Address (P.O. Box Number is Not Acceptable) 411B NE 3 STREET **BOYNTON BEACH FL 33435** City 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 age **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do/so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (4/02) □ Delete TITLE ☐ Addition BARBEE, GUS NAME NAME 411B NE 3 STREET STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33435** CITY-ST-ZIP CITY-ST-ZIP TIT! F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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:

FILED

Attaclinent



## PADGETT BUSINESS SERVICES 12459 5 500 GULFSTREAM BLVD SHIPE "2459 5 DELRAY BEACH, FL. 33483 (561) 278-4430 FAX (561) 278-4432

TO: FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS** UNIFORM BUSINESS REPORT FILINGS P.O. BOX 1500 **TALLAHASSEE, FL. 32302-1500** 

FROM: GUS BARBEE, DIRECTOR \_\_ GUS' AUTO MACHINE, INC. 411-B N.E. 3<sup>RD</sup> STREET **BOYNTON BEACH, FL. 33435-3885** 

**AUGUST 19, 2002** 

DEAR DIVISION OF CORPORATIONS,

I AM WRITING TO YOU TO REQUEST RELIEF FROM THE LATE FILING FEE ON THE UNIFORM BUSINESS REPORT. I DID NOT RECEIVE THE FIRST MAILING OF THE UNIFORM BUSINESS REPORT. THIS LATE FILING NOTICE IS THE FIRST NOTIFICATION I RECEIVED THAT THIS FEE WAS DUE. I HAVE COMPLETED THE REPORT AND ENCLOSED THE ORIGINAL FILING FEE OF \$150.00, AND RESPECTFULLY REQUEST THAT THE LATE FILLING FEE BE WAIVED.

THANK YOU FOR YOUR PROMPT ATTENTION TO THIS MATTER. IF YOU HAVE ANY FURTHER QUESTIONS, PLEASE DON'T HESITATE TO CONTACT ME.

SINCERELY,

GEORGE (GUS) BARBEE, DIRECTOR, GUS' AUTO MACHINE, INC.

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