

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Oct 02, 2002 8:00 am**  
**Secretary of State**

10-02-2002 90119 033 \*\*\*150.00

**DOCUMENT #** P01000097118  
**1. Entity Name**

**DRYWIZARD CARPET, UPHOLSTERY & RESTORATION, INC.**

**Principal Place of Business**      **Mailing Address**  
**5108 SYLVAN OAKS DRIVE**      **5108 SYLVAN OAKS DRIVE**  
**BALRICO, FL 33594**      **BALRICO, FL 33594**

**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** **65-1155871**      **Applied For**  
 Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
**JOSEPH SUSZKO**  
**5108 SYLVAN OAKS DRIVE**  
**BALRICO, FL 33594**

**7. Name and Address of New Registered Agent**  
 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** \_\_\_\_\_ (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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT</b> <input type="checkbox"/> Delete <b>JOSEPH SUSZKO</b> <b>5108 SYLVAN OAKS DRIVE</b> <b>BALRICO, FL 33594</b>
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"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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
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
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)(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:** *[Signature]*      **9/26/02 (97) 945-4939**

CR2E034 (4/02)



*Attachment*

**Cossentino & Orlando**

Accountants  
1402 Cape Coral Parkway  
Cape Coral, Florida 33904  
(941) 945-4939  
Fax (941) 945-4938

September 30, 2002

Florida Department of State  
Division of Corporation  
P.O. BOX 1500  
Tallahassee, FL 32302-1500

Re: DRYWIZARD CARPET, UPHOLSTERY & RESTORATION, INC.  
#P01000097118

*678719*

To Whom it May Concern:

I am the accountant for the above-mentioned client. In March of 2002, we contacted the Department of State because my client did not receive his annual filing report. For some reason, his annual report was sent back, and we are not sure why, since the address was correct when we called Tallahassee. We were informed that another blank form would be sent out immediately before the May 1st due date.

In late April of 2002, we again called the Department of State to inform them that we had not received the blank form. Finally, we received a blank form on September 9th, after another telephone call was made.

We complained to the Department of State, that because of their error, we did not feel that we were liable for the \$550.00 fee. They advised us that we should send this letter explaining the circumstances and that the \$150.00 fee would be accepted.

If you should have any questions, please feel free to contact me.

Sincerely,

SALVATORE J. COSENTINO

SJC/mac