

FILED
Aug 08, 2002 8:00 am
Secretary of State

07-29-2002 90004 047 ***150.00

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

DOCUMENT # **PO1000104712**

1. Entity Name

INVERNESS HOLDINGS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

423 NE 2ND AVE

Suite, Apt. #, etc.

3. Mailing Address

423 NE 2ND AVE.

Suite, Apt. #, etc.

City & State

HALLANDALE FL

Zip

33009

Country

US

City & State

HALLANDALE, FL

Zip

33009

Country

US

4. FEI Number

65-1154646

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

MICHAEL JACOBS

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

423 NE 2 AVENUE

City

HALLANDALE

FL

Zip Code

33009

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when restoring)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1, May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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
**JACOBS, MICHAEL, DIR.
423 NE 2ND AVENUE
HALLANDALE FL 33009**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/02
Date

954-401-4568
Telephone

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 on an attachment with an address, with all other like empowered.

CR2E034B (12/01)

Attachment
KEYSTONE, STEINBERG & COMPANY
Certified Public Accountants • Professional Association

Home Tower - Suite 7B
1720 Harrison Street
Hollywood, Florida 33020

JACK S. KEYSTONE, C.P.A.
HOWARD A. STEINBERG, C.P.A.

Telephone: (954) 923-8359
Fax: (954) 923-7213

41092

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Inverness Holdings, Inc.
Ref. No.: P01000104712
2002 UNIFORM BUSINESS REPORT

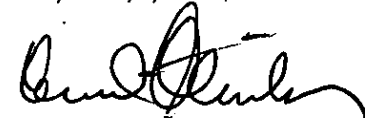
Gentlemen:

We are replying to your letter of July 30, 2002 to the above-named taxpayer and are enclosing the following:

1. Copy you mailed to us which indicates Michael Jacobs as a Director; also he is the Registered Agent and was so designated in the Articles of Incorporation. If the taxpayer had received the original report, this would have been included.

Inasmuch as the taxpayer did not receive the original report and was not aware of a filing deadline since this was their first year to file, we ask that you please waive all penalties and interest and file their report. Taxpayer is now aware there is a deadline for filing and will file timely in the future.

Very truly yours,



HOWARD A. STEINBERG

August 6, 2002

Enclosures: