

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 19, 2002 8:00 am**  
**Secretary of State**

09-19-2002 90151 041 \*\*\*150.00

**DOCUMENT # P01000111439**

1. Entity Name  
**INSIDE SOLUTION, INC.**

Principal Place of Business  
**% SUSAN NOE**  
**1440 KENNEDY CAUSEWAY #321**  
**NORTH BAY VILLAGE FL 33141**

Mailing Address  
**% SUSAN NOE**  
**1440 KENNEDY CAUSEWAY #321**  
**NORTH BAY VILLAGE FL 33141**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-1154247**

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

**FILINGS, INC.**

**3732 N.W. 16TH STREET**  
**FT. LAUDERDALE FL 33311-4132**

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.

SIGNATURE

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

(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 \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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 ☐ Delete  
 NAME **D LEWITT, JEFFREY**  
 STREET ADDRESS **1440 KENNEDY CAUSEWAY #321**  
 CITY-ST-ZIP **NORTH BAY VILLAGE FL 33141**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 NAME  
 STREET ADDRESS  
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

225 n.e. mizner blvd., ste. 250  
boca raton, florida 33432

561 394 5100  
561 750 9781 fax

www.kaufmanrossin.com

Attachment

# P01000111439  
125760

September 11, 2002

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, Florida 32314-6327

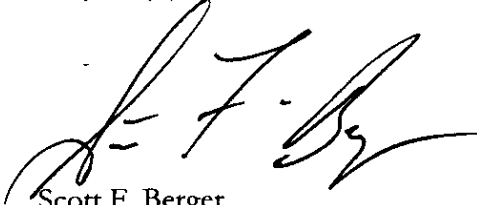
We are the accountants for the above referenced taxpayer and are writing to you on their behalf. They have just realized that their annual report along for the year 2002 was not filed.

Please be advised that prior to this date they were unaware that the report was not filed and they did not receive any other correspondence or reminder. Furthermore, it was an inadvertent oversight and not intentional. Finally, since this was there first year they were unaware of the filing requirement.

Enclosed is the completed Uniform Business Report along with a check in the amount of \$150.00. Kindly waive the late fee due to the fact that this was unintentional and their first year in business

Should you require any additional information, please do not hesitate to contact us.

Very truly yours,



Scott F. Berger  
Principal  
Kaufman, Rossin & Co.

Enclosures

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**KAUFMAN  
ROSSIN &  
CO.** PROFESSIONAL  
ASSOCIATION  
CERTIFIED PUBLIC ACCOUNTANTS