

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

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90083 005 ***150.00

DOCUMENT # **PO1000115107**

1. Entity Name



Estime-Thompson .PA

DO NOT WRITE IN THIS SPACE

90155946

2. Principal Place of Business

166 NE 96 st

Suite, Apt. #, etc.

3. Mailing Address

166 NE 96 st

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami Shores FL

City & State

Miami Shores

4. FEI Number

01-0583251

Applied For

Not Applicable

Zip

33138

Country

USA

Zip

33138

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MARIE Estime-Thompson

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

166 NE 96 st

City

Miami Shores FL

Zip Code

33138

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

8/27/2003

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
MARIE Estime Thompson
1273 NE 92 STREET
MIAMI SHORES FL 33138**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/23/2003

Daytime Phone #

(305) 756-0100

CR2E034B (12/02)

Attachment

90155946

P 01000115107

Gilbert Estime
168 NE 96 St.
Miami Shores Florida 33138

September 1, 2003

To Whom It may Concern,

We are sending you the annual report for the following 3 corporations. We did speak to someone in your office and we explained to your office the problems that we had with the mail and the new management of this office space. As we explained, the building was bought by a new person and new arrangements were made concerning the mailing out and receiving of documents. This greatly affected our ability to receive most of our mail. In addition, Renovations were made to our office which also lasted about two and half months. These issues caused our offices to loose some mail. Some of those many important pieces were of course the annual reports that were sent to our office. Fortunately for me, I was able to find out that our annual reports were not filed. As per your request, I have sent a letter of explanation and the filing fees for these 3 corps. Please process them ASAP. Your prompt attention to this matter will be greatly appreciated.

Thank you

Gilbert Estime