

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

DOCUMENT # *P01000117059*

1. Entity Name

HANDS ON SOLUTIONS INC.



FILED

03 MAR -6 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1703 ROSLYN AVE.

Suite, Apt. #, etc.

3. Mailing Address

1703 ROSLYN AVE

Suite, Apt. #, etc.

City & State

BRADENTON, FL.

City & State

BRADENTON, FL.

4. FEI Number

65-1157662

Applied For

Not Applicable

Zip

34207

Country

U.S.A

Zip

34207

Country

U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ELIZABETH TOWLE

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

1703 ROSLYN AVE.

City

BRADENTON

FL

Zip Code

34207

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

E. Towle

PRESIDENT

2-26-03

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 *P*
NAME *ELIZABETH TOWLE*
STREET ADDRESS *1703 ROSLYN AVE*
CITY-ST-ZIP *BRADENTON FLORIDA*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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)(f), 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 like empowered.

SIGNATURE:

E. Towle *ELIZABETH TOWLE*

2-26-03 *941-720-4306*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

P0100017059



1703 Roslyn Avenue
Bradenton
FL 34207

Phone : 941-720-4306
Fax: 195-4337-2212

Email: Liz_Towle@Hands-onsolutions.com

February 27th 2003

To Whom It May Concern:

Please find enclosed the required UBR forms along with checks covering the required payment.

I wish to state that it has only recently come to my attention that the company is not listed on the web site. Having further investigated the situation, I was horrified to discover, that at no time whatsoever did the company or to the best of my knowledge, information or belief, did its agents receive the annual UBR notification. As a British owned company, we were naive of the requirements to so file. Having looked back into 2002 it was not clear as to whether we had filed or not. Because of this lack of information I have enclosed two forms covering 2002 and 2003.

Now that I am fully aware of this requirement I wish to apologise for any inconvenience and humbly request that you reinstate the corporation and waive the penalty fee in this instance.

Yours Sincerely,

E Towle
President