

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90321 023 ***150.00

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FP

DOCUMENT # P02000001938

1. Entity Name

DEAN K. PIPER ENTERPRISES, INC.



Principal Place of Business

9835-16 LAKE WORTH RD.

#319

LAKE WORTH FL 33467

Mailing Address

9835-16 LAKE WORTH RD.

#319

LAKE WORTH FL 33467

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

26-0004436

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

PIPER, DEAN K

9835-16 LAKE WORTH RD

#319

LAKE WORTH FL 33467

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 ☐ Delete

**P
PIPER, DEAN K
9835-16 LAKE WORTH RD.
LAKE WORTH FL 33467**

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 Block 11 if changed, or on an attachment with an address, with authority like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/3/03

561-753-7330

CR2E034 (4/03)

Attachment

80145527
#P02000001938



Dean K. Piper Enterprises, Inc.

"Transforming Your Business & Life From Within"

www.deankpiper.com

9/5/2003

To Whom it may concern:

I have the enclosed forms that are to be postmarked by 9/10. They refer to a late fee. However, this was the first time I received any forms, paperwork or correspondence. I am requesting that you please waive the late fee due to the fact that I have never received these forms before. I am enclosing the \$150 filing fee and the completed form. Thank you for your help in this matter.

Sincerely,

Dean K. Piper
President