

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

DOCUMENT # P02000026681

1. Entity Name

JOHN CORLEW INTERIORS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 14 AM 8:00

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03-04

2. Principal Place of Business

1510 1ST STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SAME

City & State

NEPTUNE BEACH

City & State

Zip

FL 32260

Country

USA

Zip

Country

4. FEI Number

01-0616081

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

MRS

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

JOHN DAVID CORLEW

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

1510 1ST STREET

City

NEPTUNE BEACH

FL

Zip Code

32260

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)

☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25

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
DIP/ST
JOHN DAVID CORLEW
1510 1ST STREET
NEPTUNE BEACH, FL 32260

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**

700043402157
12/14/04--01040--003 **300.00

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

292

TAX ADVANTAGE

Income Tax Services
Financial & Insurance Services
Accounting & Bookkeeping Services

JAMES K. REESE, EA

1201 North Third Street • Jacksonville Beach, Florida 32250 • (904) 241-0050 • Fax (904) 241-0752

December 13, 2004

Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: John Corlew Interiors, Inc. – Uniform Business Report Reinstatement
Doc. #: P02000026681

Dear Sir or Madam:

The above referenced Taxpayer never received any preprinted Uniform Business Report for the 2003 – 2004 periods. As soon as the client brought this to our attention we completed the attached form and are mailing with the filing fee. We request your assistance in abating the Late Filing Penalties concerning these periods. Your cooperation and understanding is appreciated in advance.

If you have any questions, please do not hesitate to contact me.

Sincerely,



James K. Reese, EA

Enclosures:
Check for \$300.00
Uniform Business Report Reinstatement