

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 07, 2003 8:00 am
Secretary of State

6/18

06-18-2003 90021 024 ***150.00

DOCUMENT # P02000053636

1. Entity Name

SOUTHERN COMFORT TOURS AND TRAVEL, INC.



Principal Place of Business

**1482 N.W. 196TH STREET
MIAMI FL 33169**

Mailing Address

**1482 N.W. 196TH STREET
MIAMI FL 33169**

55050524

2. Principal Place of Business

**610 N.W. 183 ST
Suite, Apt. #, etc.
6E**

3. Mailing Address

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

MIAMI, FL

City & State

4. FEI Number

043671411

Applied For

☐ Not Applicable

Zip

33169 USA

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESTES, DIBAKD

**1482 N.W. 198TH STREET
MIAMI FL 33169**

7. Name and Address of New Registered Agent

Name

ESTES, DONALD

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

1462 N.W. 196 ST

City

MIAMI

FL

Zip Code

33169

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]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 **D** ☐ Delete
NAME **ESTES, DONALD**
STREET ADDRESS **1482 N.W. 196TH STREET**
CITY-ST-ZIP **MIAMI FL 33169**

TITLE **D** ☐ Delete
NAME **ESTES, NAOMI M**
STREET ADDRESS **1482 N.W. 196TH STREET**
CITY-ST-ZIP **MIAMI FL 33169**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/16/03 3052490771
Date Day/Time Phone #

CR2E034 (10/02)

Attachment #

Southern Comfort Tours & Travel, Inc.

1462 NW 196 St.
Miami, FL 33169
Tel: 305 249 0771 Fax: 305 653 2475

55050524
PO 2000053636

July 5, 2003

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302

To whom it may concern:

I am writing this letter to explain why my Uniform Business Report and filing fee was sent in late and ask that this office consider waiving the \$400.00 penalty that has now been applied.


I received the report only a few days before returning it with the regular payment. The notation on the envelope indicated that it had been delivered to another address prior to coming to me. I called the telephone number on the document shortly after it was received and noticed that it had arrived late. I was not able to remain on the line to speak to a representative. It was suggested at that time that I not do anything until I speak to someone at your office first, but I opted to send in the report with the \$150.00 filing fee. I am aware now that I made an error by not following that suggestion.

I called your office a second time after receiving notice that the report would not be filed until the applied penalty was paid. I was also told that the report was mailed much earlier but they were unable to verify when it was delivered.

This is my first year in business as a corporation. The entire operation is run by one person; myself. I make this statement but I am not using the number of persons in this business as an excuse. I am fully aware of my responsibilities to the state. I certainly would have returned this document and the required fee in ample time to avoid this penalty had I received it in time to do so.

This statement is true and I ask that you find these circumstances acceptable to grant a waiver of this penalty.

Sincerely,


Donald Estes - President



FLORIDA DEPARTMENT OF STATE
Secretary of State

DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

Attachment #

55050524
P02000053636

Delivered to
wrong address
Deliver to →

PO2000053636
SOUTHERN COMFORT TOURS AND TRAVEL, INC.
1462 N.W. 196TH STREET
MIAMI FL 33169-3057

TO: 0288492 RU **AUTO T2 0 1201 33169-305762



FIRST-CLASS MAIL
U.S. POSTAGE PAID
FLORIDA DIVISION OF CORPORATIONS
#421