

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

06-13-2003 90058 026 ***150.00

DOCUMENT # P02000068339

1. Entity Name
SUITE 225, INC.



Principal Place of Business
**246 NE 6TH AVENUE
DELRAY BEACH FL 33483**

Mailing Address
**246 NE 6TH AVENUE
DELRAY BEACH FL 33483**

33000900

2. Principal Place of Business
225 E. OCEAN AVE
Suite, Apt. #, etc.

3. Mailing Address
225 E. OCEAN AVE
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
LANTANA, FL

City & State
LANTANA, FL

4. FEI Number
74-3050567

Applied For
☐ Not Applicable

Zip Country
33462 PALM BEACH

Zip Country
33462 PALM BEACH

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PETERS, IRWIN
246 NE 6TH AVENUE
DELRAY BEACH FL 33483**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERS, IRWIN 246 NE 6TH AVENUE DELRAY BEACH FL 33483	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

55050456
[REDACTED]
#0200068339

BRIAN C TAMONEY
Certified Public Accountant

2200 North Federal Highway, Suite 228
Boca Raton, Florida 33431
Office (561) 338-5080
Fax (561) 368-6632

#

August 22, 2003

Division of Corporations
Uniform Business Reports Filing
P.O. Box 1500
Tallahassee, FL 32302-15

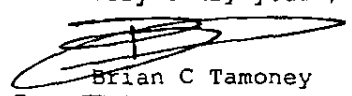
RE: Suite 225, Inc.
2003 For Profit Corporation

Dear Sir:

We are in receipt of your 2003 For Profit Corporation UBR, stating we must send \$ 550.00 for late filing. Attached find a copy of check number 1518 for \$ 150.00 already paying for this report. Please correct this problem and make sure we are in good standing since this has already been taken care of.

Should you require any further information please contact us.

Very truly yours,


Brian C Tamoney