

102

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

DOCUMENT # P02000078066

1. Entity Name

ELAINE'S, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4241 NW 51st Avenue

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Lauderdale Lakes, FL

City & State

4. FEI Number
05-0522949

Applied For
Not Applicable

Zip
33319

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Spiegel & Utrera, P.A.

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

1840 Coral Way

City Miami

FL Zip Code
33145

**DO NOT WRITE
IN THIS SPACE**

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Winsome I. Bailey, PSTD
4241 NW 51st Avenue
Lauderdale Lakes, FL 33319

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100021399321
08/04/03--01006--022 **150.00

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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Winsome I. Bailey

Winsome I. Bailey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/03

Date

954-731-1403

Daytime Phone #

2082

AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF BROWARD)

1. Winsome I. Bailey is President of ELAINE'S, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation failed to file its 2003 Uniform Business Report or pay the 2003 Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 2.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment by the Corporation of its 2003 Uniform Business Report filing fee, which are presented simultaneously with this Affidavit.
4. ELAINE'S, INC. satisfies the requirements of the Florida Statutes 607.0401.

Dated: 30th day of June, 2003

FURTHER, AFFIANT SAYETH NOT

ELAINE'S, INC.

By: W I Bailey
Winsome I. Bailey, President

SWORN AND SUBSCRIBED

before me this 30th day of June, 2003

Elsie M. Bailey
Notary Public, State of Florida at Large
Printed Name: Elsie M. Bailey
Commission Expires: _____

