

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

02-16-2003 90045 012 \*\*\*150.00  
FILED P02000078113

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000078113**

1. Entity Name

WALLAKER ENTERPRISES, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
1182 PINE RIDGE CIRCLE W

3. Mailing Address  
1182 PINE RIDGE CIRCLE W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
TARPON SPRINGS, FL

City & State  
TARPON SPRINGS, FL

4. FEI Number 13-4217800

Applied For  
Not Applicable

Zip  
34689

Country  
USA

Zip  
34689

Country  
USA

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DIANA A. FOLLETT

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

1182 PINE RIDGE CIRCLE W

City TARPON SPRINGS

FL Zip Code 34689

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	DPST: DIANA A. FOLLETT 1182 PINE RIDGE CIRCLE W TARPON SPRINGS, FL 34689	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X-14-03 X727-942-6699

CR2E034B (12/02)

7/10/11



Keith Locke  
Certified Public Accountant

July 14, 2003

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

In accord with an email to me from corphelp @ dos.state.fl.us, I am providing this letter to you to accompany the annual Uniform Business Report (UBR) for my client, Wallaker Enterprises, Inc.

This corporation was incorporated last year and delivered books and records to another preparer for tax preparation. In late June, the corporation received its data back with no preparation completed and hired me to prepare the annual tax return in early July. My client was unaware of the filing requirement for the UBR.

Inasmuch as this is the first UBR for the corporation, and since my client did not intentionally file late, please forgive the late filing and accept the \$150.00 filing fee that will accompany the annual UBR.

Thank you for your consideration and thank you for the helpful, prompt reply to my email.

Cordially,

COPY

Keith Locke, CPA

*To Whom it may Concern.*

*THIS IS ALSO TO INFORM YOU THAT I DID NOT RECEIVE ANY PRIOR NOTICE FROM THE STATE THAT I WAS TO SEND IN THE UBR. I DIDN'T EVEN KNOW THAT THE STATE SENT PRIOR NOTICES TO THAT EFFECT. ENCLOSED IS A COPY OF THE CANCELED CHECK I SENT WITH THE UBR THAT MY CPA FILED OUT FOR ME, THE LAST PERSON I HAD TO DO MY TAXES GAVE ME NO INFORMATION, DID NOT FILE MY TAX RETURN, DID NOT TELL ME ABOUT THE UBR. PLEASE FORGIVE THE LATENESS OF THIS, I'M SORRY FOR ANY INCONVENIENCE THIS HAS CAUSED.*