

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

08-15-2003 90087 045 ***150.00

DOCUMENT # P02000083555

1. Entity Name

LISA PETERSON-BARRETT, INC.

Principal Place of Business
4770 ORCHARD LANE
DELRAY BEACH FL 33445

Mailing Address
4770 ORCHARD LANE
DELRAY BEACH FL 33445

2. Principal Place of Business

3209-B Spanish Wells Drive

3. Mailing Address

3209-B Spanish Wells Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Delray Beach

City & State

Delray Beach, FL

4. FEI Number

22-3863005

Applied For

Not Applicable

Zip

33445

Country

Palm Beach

Zip

33445

Country

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

PETERSON-BARRETT, LISA
4770 ORCHARD LANE
DELRAY BEACH FL 33445

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

Lisa B Peterson-Barrett

8-10-03

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 ☐ Delete
NAME Lisa Peterson-Barrett
STREET ADDRESS 3209-B Spanish Wells Drive
CITY-ST-ZIP Delray Beach, FL 33445

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition

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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: *Lisa Peterson-Barrett*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.29.03 (561) 498-4169
Date Daytime Phone

CFR2034 (4/03)

Attachment

550516065

#P02000083555

3209-B Spanish Wells Drive
Delray Beach, FL 33445
August 12, 2003

FLORIDA DIVISION OF CORPORATIONS

Uniform Business Report Filings

P. O. Box 1500

Tallahassee, FL 32302-1500

RE: Document Number P02000083555

Entity Name: Lisa Peterson-Barrett, Inc.

To Whom This May Concern,

Recently I received the attached Form in the mail requiring me to return to you \$550.00. Unfortunately, I did not receive the Original Form that you sent out earlier in the year. I moved from my prior home in March 2003 and did not move into the above address until mid-May 2003. So, there was a mix-up with my mail. I'm hopeful that you will accept the \$150.00 original fee due to the mail disruption.

Thanks kindly for your consideration and assistance.

Regards,

Lisa Peterson-Barrett

Lisa Peterson-Barrett