

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003 8:00 am
Secretary of State

FRONT AV

08-04-2003 90154 049 ***150.00

DOCUMENT # P02000107217 (L)



1. Entity Name
WILLIAMS WINDOW TREATMENTS, INC.

Principal Place of Business
**921 BROADWAY
DUNEDIN FL 34698**

Mailing Address
**921 BROADWAY
DUNEDIN FL 34698**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **03-0485559** Applied For
 Not Applicable

CHECK HERE IF MAKING CHANGES

Zip Country Zip Country

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

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

Name
PAMELA J WILLIAMS
Street Address (P.O. Box Number is Not Acceptable)
695 Bayside DR
City **Tarpon Springs** FL Zip Code **33689**

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 *Pamela J. Williams*
Signature, typed or printed name of registered agent and title if applicable.

7/31/03
DATE

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS, PAMELA J 921 BROADWAY DUNEDIN FL 34698	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLIAMS, ROBERT S 921 BROADWAY DUNEDIN FL 34698	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WILLIAMS, TIFFANY 921 BROADWAY DUNEDIN FL 34698	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

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: *Pamela J. Williams*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/03 727-728-8004
Date Daytime Phone #

CR2E034 (10/02)

80135952
#P02000107217

Attachment 7/31/03

Dear Sus:

I am writing to you to ask that I may only pay the 150⁰⁰ filing fee that was due for my new business. I applied for permits etc @ the end of 2002, but did not actually start this business until January 2003. We had a name change at the end of 2002 and the lawyer never notified the I.R.S. So the FEIN # was still under the old "Williams Design Studio" name and I only recently had this form sent to me so that is why I missed the filing date. Could you please notify me by mail at the address listed as to if I could be granted an exception to the penalty ~~and~~ this will really cause me a financial hardship at this time to pay the 550⁰⁰.

Thank You —

Sincerely,

Pam Williams