

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90100 014 ***150.00

DOCUMENT # P02000108520

1. Entity Name
M & P LAND SURVEYORS, INC.



Principal Place of Business
**8298 NW 24TH STREET
MIAMI SPRINGS, FL 33065 US**

Mailing Address
**PO BOX 770157
POMPANO BEACH, FL 33077-0157 US**

54060637



DO NOT WRITE IN THIS SPACE

07012004 No Chg-P CR2E034 (10/03)

4. FEI Number
75-3083817

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**NEEDLE, HAROLD
8298 NW 24TH STREET
CORAL SPRINGS, FL 33065**

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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

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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
**PS
HAROLD, NEEDLE
8298 NW 24TH STREET
CORAL SPRINGS, FL 33065**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

54060637

M & P Land Surveyors, Inc. dba
Boca Land Surveyors, Inc.
P.O. Box 770157
Coral Springs, FL 33077
Tel: (954) 340-8455

July 1st, 2004

Reinstatement Division
Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302

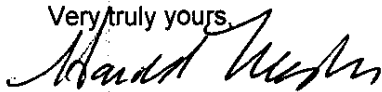
Ref: Request for Waiver of Reinstatement Penalty for DOC# P02000108520; M & P Land
Surveyors, Inc. dba Boca Land Surveyors, Inc.

Dear Sir or Madam,

Following this cover letter please find the 2004 Uniform Business Report along with a check in the amount of \$150.00. We understand now that the filing deadline of May 1st, 2003 has passed, but had been awaiting the UBR report for modification from the Division of Corporations which never arrived.

Hence, we respectfully request that you accept the 2004 For Profit Corporation UBR along with this reinstatement request and waive the \$400.00 penalty due to not having received the initial report. We greatly appreciate your prompt and professional attention to this matter.

Very truly yours,



Mr. Harold Needle
President