2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2003 8:00 am
Secretary of State
07-24-2003 90111 033 ***150.00

001216 AV

DOCUMENT # P02000113235

1. Entity Name
MARIA F. GOMES, INC.

Principal Place of Business
6700 ALOMA AVENUE
WINTER PARK FL 32792

Mailing Address
6700 ALOMA AVENUE
WINTER PARK FL 32792

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 14-1852177 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STONE, STEPHEN M
725 NORTH MAGNOLIA AVENUE
ORLANDO FL 32803

7. Name and Address of New Registered Agent

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 ______________________
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PVTD GOMES, MARIA F 6700 ALOMA AVENUE WINTER PARK FL 32792	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD NELSON, PETER N 6700 ALOMA AVENUE WINTER PARK FL 32792	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (4/03)

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 REQUIRED 07-21-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment #

90146119

July 21, 2003

P02000113235

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

Re: Maria F. Gomes, Inc.
FEIN: 14-1852177

To whom it may concern,

I incorporated maria F. Gomes, Inc. in October, 2002. This is my first time owning a corporation and with them is a lot to learn. I have tried very hard to keep up with all the regulations necessary with this corporation. I have just received in the mail my 2003 Profit Corporation Annual Report stating 2ND NOTICE. This is the first notice I have ever received. I did not know about this report therefore did not know to call when I did not receive one. I am sending a check for the original $150.00 filing fee with the hope that you can understand my dilemma. If you have any further questions, please do not hesitate to contact me at (407)673-2712. I apologize for any inconvenience. Thank you for your cooperation.

Maria F. Gomes

Maria F. Gomes
Owner