

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000121316

1. Entity Name

THOMAS E. KNIEPER, INC.



FILED

03 OCT 31 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7504 NW 68 Avenue

Suite, Apt. #, etc.

3. Mailing Address
7504 NW 68 Avenue

Suite, Apt. #, etc.

REINSTATEMENT 03
DO NOT WRITE IN THIS SPACE

City & State
Tamarac, FL

City & State
Tamarac, FL

4. FEI Number 13-4221666

Applied For
Not Applicable

Zip
33321

Country
USA

Zip
33321

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 Knieper, Thomas E

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

7504 NW 68 Avenue

City Tamarac

FL Zip Code
33321

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)

10/22/03

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
PST
Knieper, Thomas E.
7504 NW 68 Avenue, Tamarac, FL 33321

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
600024330056
10/31/03--01028--018 **150.00

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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 on an attachment with an address, with an other like empowered.

SIGNATURE:

Thomas E. Knieper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/03

Date

954-721-3181

Daytime Phone #

CR2E034B (12/02)

Thomas E. Knieper, Inc.

7504 NW 68 Avenue
Tamarac, FL 33321
(954) 721-3181

October 22, 2003

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

Re: Corporate renewal (UBR) Thomas E. Knieper, Inc. P02000121316

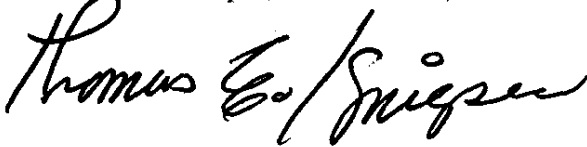
Dear Department of State:

I recently received a notice of dissolution of my corporation. My corporation is newly formed on November 13, 2002. The first notice I received concerning the corporate renewal was a dissolution notice. We have been having problems with our mailing address, as many mailings go to a neighbor without been delivered. We have been working hard to correct this problem.

The original fee for renewal of the UBR is \$150. We have enclosed a check for this amount and hope you can renew our corporation retroactively for lack of notice and the youth of our corporation.

Thank you for your consideration,

Thomas E. Knieper, President

A handwritten signature in black ink that reads "Thomas E. Knieper". The signature is written in a cursive style with a large, stylized 'T' and 'K'.