

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90176 007 ***150.00

0149302 MB

DOCUMENT # P02000132516

1. Entity Name

LARJON CORPORATION



Principal Place of Business

1410 S. MCCALL RD.

B-201

ENGLEWOOD FL 34223

Mailing Address

9223 GRACE LANE

PHILADELPHIA PA 19115

2. Principal Place of Business

3. Mailing Address

1702 FREDEMATA BL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

SOUTHAMPTON PA

4. FEI Number

23-3889031

Applied For

Not Applicable

Zip

Country

Zip

Country

18966

USA

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

WOLOWEC, WOLODIMER

1401 S. MCCALL RD.

B-201

ENGLEWOOD FL 34223

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

WOLODIMER WOLOWEC PRES 8/15/03

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 **P** ☐ Delete
NAME **WOLODIMER, WOLOWEC**
STREET ADDRESS **9223 GRACE LANE**
CITY-ST-ZIP **PHILADELPHIA PA 19115**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SECY** ☐ Delete
NAME **VERA WOLOWEC**
STREET ADDRESS **9223 GRACE LANE**
CITY-ST-ZIP **PHILADELPHIA PA 19115**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED VERA WOLOWEC SECY 8/15/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

90151581

LARJON CORPORATION
9223 GRACE LANE
PHILADELPHIA, PA 19115-2824

August 1, 2003

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, FL 32302-1500


Ref: 2003 Uniform Business Report – Larjon Corporation P02000132516

I request that the penalty for the late fee for the subject report be waived. The Corporation was formed in December 2002. The attached report is the first notification that the Corporation received, and was not aware that an initial report must be filed between January and May 2003. The Corporation did not receive prior notice.

I am enclosing the original filing fee of \$150.00 and the completed report.]

Thank you for your prompt consideration.

Sincerely,



Wolodimir Wolowec
President