## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1072

DOCUMENT # Po 30000 28/88

RICHARD N SALTER PA



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS:

04 NOV -9 AM 8: 00

DO NOT	WRITE IN THIS	SPACE	
2. Principal Place of Business 29// NE 4/	3. Mailing Address		HEINDIAIEMENT OF
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE MRD
FT CAUDERDA	City & State		4. FEI Number - Applied For Not Applicable
Zip 333 08 Cour	ntry Zip	Country	5. Certificate of Status Desired   \$8.75 Additional Fee Required
DO	NOT WRITE	Name RICHA Street Address (	(P.O. Box Number is Not Acceptable)
	HIS SPACE		AUDENDALE FL Zip Code 333 08
the obligations of registered ag	gent.	g its registered office or registe	red agent, or both, in the State of Florida. I am familiar with, and accept
January 1 - May 1 F After May 1, Fee Amended UBR a Make Check Payable to Florid	ee is \$150.00 is \$550.00 is \$61.25	(NOTE: registered Agent signature requirer	9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TO CAD	OFFICERS AND DIRECTORS  LO SALTER  VE YI FRESET  DERDALE FL 333	TITLE NAME STREET ADDRESS CITY ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		TITLE  NAME  STREET ADDRESS  CITY-ST-2P	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	100042607991   1/09/0401068022 **150.00
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS	

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 of stee 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 a property of the corporation of the receiver of the corporation or the receiver of the corporation o

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/04

Daytime Phone #

2E034B (12/02

## BETTER INCOME TAX SERVICE

660 W OAKLAND PARK BLVD FT LAUDERDALE, FL 33311-1728 Phone (954) 561-1040 Fax (954) 561-1041 Email: Bta1040@aol.com

**OCTOBER 25, 2004** 

RICHARD N SALTER PA DOC # P03000028188

ENCLOSED PLEASE FIND THE UBR APPLICATION AND A CHECK FOR \$150.00, THE CORPORATION WAS FROMED IN MARCH 2003. THE TAXPAYER HAS MOVED SEVERAL TIMES AND NEVER GOT THE NOTICE.

PLEASE CONSIDER NOT CHARGING A PENALTY FOR THESE REASONS.

YTHANK YOU FOR YOUR CONSIDERATION IN THIS MATTER.

**VERY TRULY YOURS,** 

APRIL PEACH