

2004 FOR PROFIT CORPORATION ANNUAL REPORT

1/2!

FILED
Feb 23, 2004 8:00 am
Secretary of State

01-29-2004 90106 003 ***150.00

DOCUMENT # P03000080655

1. Entity Name
SUPPLEMENT AUTHORITY, INC.



Principal Place of Business
**8770 S.W. 56TH PLACE
COOPER CITY, FL 33328**

Mailing Address
**8770 S.W. 56TH PLACE
COOPER CITY, FL 33328**

66402040



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01222004

Chg-P

CR2E034 (10/03)

4. FEI Number **38-3685810** Applied For
Not Applicable

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

**LUBIN, SANDRA
8770 S.W. 56TH PLACE
COOPER CITY, FL 33328**

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 *Sandra Lubin*

1-22-04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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 ☐ Delete
NAME **P**
STREET ADDRESS **LUBIN, SANDRA**
CITY-ST-ZIP **8770 S.W. 56TH PLACE
COOPER CITY, FL 33328**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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)(f), 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: *Sandra Lubin* Sandra Lubin

1-22-04

954 680 7759

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

200338 R71006

SB V



Department of the Treasury
Internal Revenue Service
MEMPHIS TN 37501-0038

attachgent

Date of this notice:
Taxpayer Identifying Number
Form:

SEP. 29, 2003
38-3685810

Tax Period:

For assistance you may
call us at:

1-800-829-0115

Or you may write to us at
the address shown at the
left. If you write, be
sure to attach the bottom
part of this notice.

SUPPLEMENT AUTHORITY COM INC
9122 GRIFFIN RD
COOPER CITY FL 33328-3540225

NOTICE OF ACCEPTANCE AS AN S-CORPORATION

WE HAVE ACCEPTED YOUR ELECTION TO BE TREATED AS AN S CORPORATION WITH AN
~~ACCOUNTING PERIOD OF DECEMBER BEGINNING AUG. 6, 2003.~~

PLEASE KEEP THIS NOTICE IN YOUR TAX RECORDS AS VERIFICATION OF YOUR ACCEPTANCE
AS AN S-CORPORATION.

IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR THE ACTIONS WE HAVE TAKEN, PLEASE
WRITE TO US AT THE ADDRESS SHOWN ABOVE. IF YOU PREFER, YOU MAY CALL US AT THE IRS
TELEPHONE NUMBER LISTED IN YOUR LOCAL DIRECTORY. AN EMPLOYEE THERE MAY BE ABLE TO
HELP YOU. HOWEVER, THE OFFICE AT THE ADDRESS SHOWN ON THIS NOTICE IS MOST FAMILIAR
WITH YOUR CASE.

IF YOU WRITE TO US, PLEASE PROVIDE YOUR TELEPHONE NUMBER AND THE MOST CONVENIENT
TIME FOR US TO CALL SO WE CAN CONTACT YOU TO RESOLVE YOUR INQUIRY. PLEASE RETURN THE
BOTTOM PART OF THIS NOTICE TO HELP US IDENTIFY YOUR CASE.

THANK YOU FOR YOUR COOPERATION.

HELPFUL HINT: FOR FASTER SERVICE, TRY CALLING US ANY DAY EXCEPT MONDAY WHEN OUR
CALL VOLUMES ARE HIGHEST.

To make sure that IRS employees give courteous responses and correct information to taxpayers, a second IRS employee sometimes listens in on
telephone calls.

Overlay 5 Form 8489 (Rev.8-

~~Keep this part for your records~~

Return this part to us with your check or inquiry

Your telephone number

Best time to call

200338

29953-652-03937-3

INTERNAL REVENUE SERVICE
MEMPHIS TN 37501-0038

SUPPLEMENT AUTHORITY COM INC
9122 GRIFFIN RD
COOPER CITY FL 33328-3540225

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SB



383685810 FS

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