

10f2

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

FILED

02 NOV 21 PM 1:05

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

UBR

01-02

DOCUMENT # **P93000014962**

1. Entity Name  
**ALAN B. Inc**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**10895 NW 7 St**  
Suite, Apt. #, etc.  
City & State  
**Coral Springs FL**  
Zip  
**33071**  
Country  
**Broward**

3. Mailing Address  
**(Same)**  
Suite, Apt. #, etc.  
City & State  
**(Same)**  
Zip  
**(Same)**  
Country  
**(Same)**

4. FEI Number  
**650391700**  
Applied For  
☐ Not Applicable

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

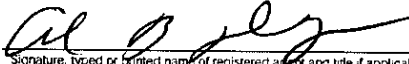
DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**Alan B. Haimowitz**  
Street Address (P.O. Box Number is Not Acceptable)  
**10895 NW 7 St**  
City  
**Coral Springs** **FL** Zip Code  
**33071**

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.

SIGNATURE  **Alan B. Haimowitz** **11/19/02**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE  
**President**  
NAME  
**ALAN B. Haimowitz**  
STREET ADDRESS  
**10895 NW 7 St**  
CITY-ST-ZIP  
**Coral Springs FL 33071**

TITLE  
**100009150401**  
NAME  
**11/21/02--01064--020 \*\*300.00**  
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-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-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Alan B Haimowitz** **11/19/02** **954-295-8650**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

20f2

**ALAN B INC.**  
10895 N.W. 7<sup>TH</sup> STREET  
CORAL SPRINGS, FL 33071  
(954) 295-8680

November 19, 2002

Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: ALAN B INC. #65-0391700

To Whom It May Concern:

Please accept this letter as a formal request to reinstate my corporation. I formed this corporation on 2/22/93 and have renewed the license each year. I am an Insurance Agent and was surprised when I contracted with a carrier and received a letter from them, indicating that my corporation was inactive. I was alarmed since I was not aware of this.

I spoke with an employee in the Division of Corporations and advised that I was not in receipt of the renewal forms from your office. Naturally, if I had received the renewal forms, my corporation would be active at this time. I was advised by your office to submit a check in the amount of \$300.00, along with the UBR Form and this letter, in order to reinstate my corporation. Please find these items enclosed.

Thank you for your attention in this matter.

Sincerely,



Alan Bennett  
ALAN B INC.

AB/kh

Encls.