

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 SEP 20 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
2001 UBR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P93000024652

1. Corporation Name

DECOLORES AUTO GLASS DETAILING, INC

2. Principal Office Address

260 SW 22 Avenue

3. Mailing Office Address

260 SW 22 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33135

Country

Miami-Dade

Zip

33135

Country

Miami-Dade

2001 UBR

4. Date To D per	5. Incorporated or Qualified Business in Florida	6. FEI Number	7. Applied For (Not Applicable)
	3-29-93	65-0402957	
8. CERTIFICATE OF STATUS DESIRED ☐	9. 75 Additional Fee required (for Certificate of Status)		

7. Name and Address of Current Registered Agent

Name

Jennifer L. Schechtman, CPA

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

9050 Pines Blvd.

Suite, Apt. #, Etc.

Suite 205

City

Pembroke Pines

State

FL

Zip Code

33024

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of

section 607.5605 or 617.0605, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPST	Jonathan Krantz	260 SW 22 Avenue	Miami, FL 33135

300004614323-3
-09/27/01-01000-005
****150.00 ****150.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in this statement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption on this application to file and accurate, and my signature shall have the same legal effect as if made under oath.

Chapter 607 or 617, F.S. I further certify that when filing this of section 607.0401 or 617.0401, F.S., that all fees under section 119.07(3)(b), F.S. The information indicated

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR

Date

305-649-0595

- Daytime Phone #

ATTACHMENT
282

Jennifer L. Schechtman P.A.

CERTIFIED PUBLIC ACCOUNTANT

9050 PINES BOULEVARD, SUITE 205
PEMBROKE PINES, FL 33024
BROWARD 954/437-0700
DADE 305/625-9779
FAX 954/436-8195

September 10, 2001

P93000024652

Uniform Business Report
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

RE: DECOLORES AUTO GLASS DETAILING, INC. FEIN 65-0402957

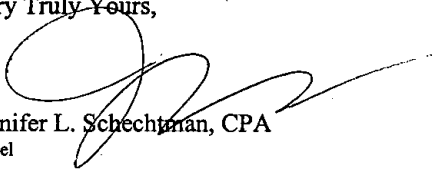
Dear Sir or Madam:

I am the Registered agent for the above-referenced company.

Enclosed please find a Uniform Business Reinstatement Form for Decolores Auto Glass Detailing, Inc. The company never received the UBR Form for 2000. I called your office to discuss this problem. Pursuant to that conversation I am respectfully asking for an abatement of penalties. Also please find enclosed a check in the amount of \$150 for reinstatement for the year 2001.

I want to thank you for all of the help that was given to me. If you have any questions, please contact my office.

Very Truly Yours,


Jennifer L. Schechtman, CPA
JLS/el

ww.cor01Decolores auto -UBR REINSTATEMENT-LTR