

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

1 of 2

DOCUMENT # P93000039689

1. Entity Name
THE 4-W D SHOP, INC.



03 AUG 27 PM 6:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
17860 SOUTH DIXIE HWY
MIAMI FL 33157
US

Mailing Address
17860 SOUTH DIXIE HWY
MIAMI FL 33157
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07/21/03 90141 011 \$150.00

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0416332

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

FIGUEROA, FELIX
17860 S. DIXIE HWY
MIAMI FL 33157

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

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	PD	<input type="checkbox"/> Delete
NAME	FIGUEROA, FELIX	
STREET ADDRESS	17860 S. DIXIE HWY	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		<input type="checkbox"/> Delete
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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

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TURNER & ASSOCIATES, LLP
CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS ADVISORS

SunTrust International Center
One Southeast Third Avenue
Suite 1440
Miami, Florida 33131

Telephone 305-377-0707
Facsimile 305-377-0787
www.turnercpas.com

August 21, 2003

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

Re: The 4-W D Shop, Inc.
Document #P93000039689


Dear Sir/Madam:

We are in receipt of your letter dated July 23, 2003, a copy of which is enclosed.

The original annual report was not received by this corporation. When they received the second notice, they promptly completed and mailed it in with the \$150 fee. Please waive the late fee in the amount of \$400.

Thank you for your consideration in this matter. Should you have any questions, please contact me.

Very truly yours,


Stephen C. Enriquez
For the firm

SCE/lgl

Enclosures

cc: The 4-W D Shop, Inc.