

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000076333

1. Entity Name
FINANCIAL CONTRACTING SERVICES, INC.

FILED
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90164 032 ***150.00

009088
AV

Principal Place of Business
3211 PLEASANT LAKE DR.
TAMPA FL 33618

Mailing Address
3211 PLEASANT LAKE DR.
TAMPA FL 33618



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3206429		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
YANEZ, ARMANDO J 3211 PLEASANT LAKE DR. TAMPA FL 33618		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] PRESIDENT 7/29/2002
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. ☐ **FILE NOW!!! FEE IS \$550.00**
After September 13, 2002 Fee will be \$750.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD YANEZ, ARMANDO J 3211 PLEASANT LAKE DR. TAMPA FL 33618 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 7/29/2002 813-968-2142
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment
Doc. # P93000076333
Financial Contracting Services, Inc.

July 29, 2002

To whom it may concern

Reference: UBR Report 2002

Dear Sir or Madam:

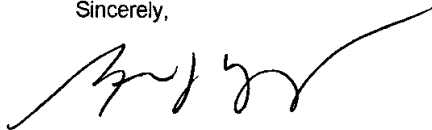
I am writing this letter to request the waiver of the late fee imposed on the corporation's UBR report. I am the only employee in my corporation and I am sorry to say that the initial form that I normally received in the mail did not reach me. I always meet my obligations with the State of Florida on time. I am certain that if you check your records you will see that I have not been late in previous years.

Business has been tough since the middle of last year and revenues have been zero so far this year.

Enclosed please find my regular fee of \$150.00. I am doing this only after having consulted with the Tallahassee office. I apologize for any inconvenience that I may have caused the Florida Department of State Division of Corporations.

I respectfully request your consideration on this matter.

Sincerely,



Armando J. Yanez
President