## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

of the corporation or the received

SIGNATURE:

## Aug 11, 2003 8:00 am Secretary of State P94000002182 DOCUMENT # 08-11-2003 90277 038 \*\*\*158 75 1. Entity Name GROUP ENTERPRISES, INC. Principal Place of Business Mailing Address 7744 PETERS ROAD 5088 N.W 89 WAY CORAL SPRINGS FL 33076 PMR #311 PLANTATION FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0463060 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREENE, ELYSE Street Address (P.O. Box Number is Not Acceptable) 5088 NW 89TH WAY **CORAL SPRINGS FL 33067** City 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 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PDC TITLE Delete TITLE Addition GREENE, ELYSE NAME NAME 5088 N W 89 WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORAL SPRINGS FL 33067** CITY-ST-ZIP SD Detete ☐ Change Addition TITLE TITLE NAME SPITZ, FRANCES NAME STREET ADDRESS STREET ADDRESS 5088 N.W. 89 WAY CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33067 TITLE TITLE ☐ Change ☐ Addition -- - Delete NAME korn, Judith NAME STREET ADDRESS 3201 SW 22 ST STREET ADDRESS CITY-ST-ZIP CITY~ST~ZIP FT LAUDERDALE FL TITLE Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 misseport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

**FILED** 

8.6.2003 954-683-1706

GROUP ENTERPRISES, INC. Atlachment

90149712 #P9400002182

July 31, 2003

Florida Department of State Division of Corporations PO Box 6327 Tallahassee Florida 32314

Greetings:

My sister and I run this small consulting firm. Neither she nor I received a prior notice of the annual Uniform Business Report; the mailbox operator had an employee earlier this year who often placed mail in the wrong boxes. Quite a lot of mail was misplaced for several weeks. While we returned pieces that were not ours and some pieces were returned to us, some mail, we learned, was never returned. We suspect that the original notice was in this latter group of mail.

We hope you will accept this filing and waive the late fee, and we thank you for your kind consideration of this request. If there are questions, please call me at 954-683-1706.

Cordially,

Elyse Greene President