

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **P94000 19888**

1. Entity Name

EMCAM, INC.

Principal Place of Business

**Shoreham by the Sea
Unit 47
5302 S. Atlantic Ave.
New Smyrna Beach, FL**

Mailing Address

**235 West French Ave.
Orange City, FL 32763**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3280238

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

FILED

00 APR 14 AM 9:03

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

T. G. Blackwell

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

235 West French Ave.

City

Orange City

FL

Zip Code

32763

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

T. G. Blackwell

(NOTE: Registered Agent signature required when reinstating)

3/31/00

DATE

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

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 ☐ Delete
NAME **PD**
STREET ADDRESS **Wilson Hawa**
CITY-ST-ZIP **Shoreham by the Sea Unit 47**
5302 S. Atlantic Ave, NSB

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
200003219222-9
-04/24/00-01003-020
******300.00 ****150.00**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
03/11/99 90076004 TS
1500

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/31/00

CR2E034 (9/99)

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T.G. BLACKWELL • C.P.A.
A Professional Association

Florida Institute of C.P.A.s

American Institute of C.P.A.s

March 31, 2000

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Emcam, Inc. EIN#59-3280238
Camem, Inc. EIN#59-3432242

Dear Madam or Sir:

Enclosed are Corporation Reinstatement application forms for the above-referenced two corporations. Also enclosed are the current returns for the year 2000 with payment of both \$150 filing fees.

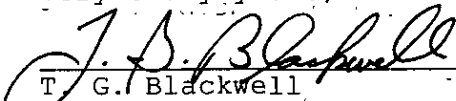
Upon contacting your offices in response to a notice of late filing of these returns we found that the 1999 returns were timely filed as we had thought. However, we also learned that the returns were deemed to be incomplete because a resident agent change appeared on them without the new agent's signature.

Please accept our explanation of reasonable cause for this inadvertent omission. Mr. Wilson Hawa, who is the sole owner of these corporations, is a non-resident of the U.S. and as such must rely on local professional advisors to keep him abreast of the current local filing requirements. In an effort to further this compliance, he appointed myself as the registered agent to assist in this following the sudden death of his previous attorney and registered agent in February of 1999. His death prevented the registered agent from forwarding the documents to Mr. Hawa. Unfortunately, when Mr. Hawa submitted the Annual Reports for 1999 while out of the country, he did not know that the newly appointed registered agent's signature was required on the form he timely filed and paid.

Please consider the above information as a reasonable explanation of the circumstances causing the omission and therefore worthy of an abatement of penalty.

Your consideration in this matter will be greatly appreciated and if you have any questions, please do not hesitate to contact me.

Very truly yours,


T. G. Blackwell
Certified Public Accountant

CC: Wilson Hawa