2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000089910

1. Entity Name

4 SIERRA, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State
03-20-2000 90137 022 ***150.00

ORMOND BEACH FL 32174			Mailing Address 109 HERITAGE CIR ORMOND BEACH FL 32174-4208							
							C0040679			
			3. Mailing Address			- 				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
07. 2 0			City's C	1010						pplied For
City & State			City`& S	lale		4. FEI Number 56 3295052			Not Applicable	
Zip	Country	·	Zip		Country	5. (Certificate of Status Desired		8.75 Adee Require	
	6. Name and Add	ress of Current Re	gistered A	gent		7. 1	Name and Address of New Re	gistered Aç	gent	
109 H	des, John F Jr. Heritage Cir Ond Beach Fl 321			<u></u>	Name Street Address (P.O. Box Number is Not Acceptable)					
					City			FL	Zip Cod	le
8 The above	named entity submits	this statement for the	ne purpose	of changing its	registered office o	r registered ag	ent, or both, in the State of Flor		L	
o. The above	Trained entity subtritts	grad state ment for th		or origing to	registared emoc e	og.o.o.oa ag	ora, or boar, in the orace of the			
SIGNATURE .			1					DATE		
	Signature, typed or printed name	ne of registered agent and	title if applicabl		E: Registered Agent signat		einstating)	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 \$550.0 Make Check Payable to Department of \$550.0			550.00	10. Election Campaign Fina Trust Fund Contribution			00 May Be d to Fees
11.		OFFICERS AND DI	RECTORS		12.	AD	DITIONS/CHANGES TO OFFI	CERS AND I	DIRECTOR	IS IN 11
TITLE	V		'	☐ Delete	TITLE				☐ Change	Addition Addition
NAME STREET ADDRESS	MENDES, JOHN F 109 HERITAGE CIF				NAME STREET ADDRESS					
CITY-ST-ZIP	ORMOND BEACH				CITY-ST-ZIP	1				
TITLE	PD		,	☐ Delete	TITLE	-			Change	☐ Addition
NAME	MENDES, JOHN F.	1		NAME	1705	SKYHAWK Court	•			
STREET ADDRESS CITY-ST-ZIP	25 FAYSON LAKES			STREET ADDRESS CITY-ST-ZIP	1 * -	BEACH, FL 321				
TITLE	KINNELON NJ STD	-0	<u> </u>		TITLE	DAYTONA	I BEACH, FL SZI		✓ Change	☐ Addition
NAME -	MENDES, DOROTH	IY A.		☐ Delete	MARAE			,	er onango	
STREET ADDRESS	25 FAYSON LAKES			STREET ADDRESS	1	KYHAWK COURT				
CITY-ST-ZIP	KINNELON NJ				CITY-ST-ZIP	DAYTON	VA BEACH, FL 32	124		
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NAME					NAME					
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STREET ADDRESS					STREET ADDRESS					
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				☐ Delete	TITLE				☐ Change	Addition Addition
TITLE	ł									
TITLE NAME					NAME					
TITLE					NAME STREET ADDRESS CITY-ST-ZIP					

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 addiges, with all other like empowered.

SIGNATURE:

DEPARTMENT OF THE TACASURY INTERNAL REVENUE SE ATLANTA GA 39901 [CE

DATE OF THIS NOTICE: 02-24-95
HUMBER OF S NOTICE: CP 575 A
EMPLOYER IS ATTIFICATION NUMBER: 59-3295052
FORM: SS-4

0717025811

354-1760 LOCAL JACKSONVILL 1-800-829-1040 OTHER FL

4 SIERRA INC % JOHN MENDES 109 HERITAGE CIR 32174 ORMOND BEACH FL

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 59-3295052. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIH, it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIII.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within five to six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

Form 1120

03/15/95

If the due date has passed please complete the form and send it to us by 03-13-95. If we don't receive the form by that date additional penalties and interest will be charged. If you weren't in business or didn't hire employees for the tax period shown, please file the form showing that you have no liability.

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have any questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

Thank you for your cooperation.