

2000 UNIFORM BUSINESS REPORT (UBR)

Pg 1 of 2

DOCUMENT # P95000012088

1. Entity Name
LITTLE DETAILS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 27 AM 10:00

Principal Place of Business
1594 S.W. 13TH TERRACE
BOYNTON BEACH FL 33426

Mailing Address
1594 S.W. 13TH TERRACE
BOYNTON BEACH FL 33426



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Blvd. Mailing Address
5700 Okeechobee Blvd. 5700 Okeechobee Blvd.
Suite, Apt. #, etc. # 23 Suite, Apt. #, etc. # 23

City & State West Palm Beach FL City & State West Palm Beach FL

Zip 33417 Country USA Zip 33417 Country USA

4. FEI Number 65-0561573 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WEST, PATRICIA MARIE
1594 S.W. 13TH TERRACE
BOYNTON BEACH FL 33426

7. Name and Address of New Registered Agent
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.
SIGNATURE *Patricia Marie West* 7/21/00
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, 2000 Min. 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	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEST, PATRICIA M.	NAME	
STREET ADDRESS	1594 SW 13TH TERRACE	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: *Patricia Marie West* 7/21/00 561-687-5099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Little Details, Inc.
5700 Okeechobee Boulevard
West Palm Beach, Florida 33417

Division of Corporations
PO Box 1500
Tallahassee, Florida 32302

Re:P95000012088

To Whom It May Concern;

Andy Dunlap

I am writing this letter in response to a second annual filing report that I received from you. I filed my report on time in March 2000 and my check was cleared according to your office on March 28, 2000. According to your office, they said that I was sent a rejection letter because I didn't sign the original form. I never received the rejection letter that was sent to me to sign. I am enclosing the second annual filing form and asking if you can please forgive the penalty and reinstate my corporation. Sorry for the inconvenience and thank you in advance for your cooperation in this matter.

Sincerely,

Patricia West

Patricia West