

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

FILED

DOCUMENT # **P95000025388**

1. Entity Name

FANCY THIS, INC.

03 JAN 15 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100010135481
01/15/03--01076--008 **300.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2231 NE 21ST AVENUE

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 549

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

JENSEN BEACH, FL

City & State

JENSEN BEACH, FL

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CHARITY JACOBSEN-NEWTON

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

2231 NE 21ST AVENUE

City

JENSEN BEACH

FL

Zip Code

34957-5183

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature Required When Reinstating)

DATE

CHARITY JACOBSEN-NEWTON

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



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**P
CHARITY NEWTON-JACOBSEN
2231 NE 21ST AVENUE
JENSEN BEACH, FL 34957-5183**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
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CITY-STATE-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARITY NEWTON-JACOBSEN

Date

Daytime Phone #

561-287-1123

CR2E034B (12/01)

January 3, 2003

Uniform Business Report
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



3300 UNIVERSITY DRIVE
SUITE 504
CORAL SPRINGS, FL 33065-4131
PHONE: 954-346-3200
FAX: 954-755-8672

EMAIL: JOELTAXPRO@AOL.COM
WWW.CREATIVE-ACCOUNTING.COM

re: Uniform Business Report - Fancy This, Inc. P95000025388

To Whom It May Concern:

With regards to my above captioned client, enclosed is a Uniform Business Report and a check in the amount of \$300.00 to cover the fee for 2002 and 2003 as directed by your office in a telephone call last week.

The reason they did not file timely was because their mailing address changed and they never received the necessary forms.

Therefore, we respectfully request that the corporation be reinstated.

If you have any questions, please call me.

Sincerely,

Joel E. Jacobson

P.S. Please note that my address has changed slightly. I am now in **Suite 904** and the zip + four code is now **33065-6312**.