

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

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90095 047 ***150.00

DOCUMENT # **P95000044687**

1. Entity Name

TELPRINC CORPORATION



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8238 NW 103 ST

Suite, Apt. #, etc.

3. Mailing Address

8238 NW 103 ST

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hialeah FL

City & State

Hialeah FL

4. FEI Number

65-0590915

Applied For

Not Applicable

Zip

33016

Country

Zip

33016

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

VICTOR PRINCE

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

5250 SW 5 ST

City

Miami

FL

Zip Code

33134

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10.

OFFICERS AND DIRECTORS

TITLE	PSD
NAME	Prince, Victor
STREET ADDRESS	5250 SW 5 ST
CITY-STATE-ZIP	Miami FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/6/03
Date

Daytime Phone #

CR200348 (12/02)

Attachment
80147454

TELPRINC CORPORATION

8238 NW 103 STREET
HIALEAH FL 33016

September 6, 2003

FLORIDA DEPT. OF STATE
Division of Corporations -Annual Report Filings
P O Box 6327
Tallahassee FL 32314

RE: 2003 Annual Report #P95000044687

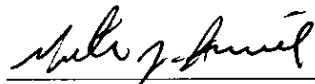
Dear Sir/Madam:

We reviewed our records and we did not received any forms from the Department of State to renew our corporation. We were closed for some period do to the economic conditions at the end of 2002 and maybe it is one of the factors that we did not received any forms, and we open in a new location (Please see our new address above).

We found that we have to pay a late fee. We are an small business and under current economic conditions, we can not afford to pay an additional fee to renew the corporation. Please renewed our corporation, we are including the regular fees for 2003.

We appreciate your help.

Sincerely,



Victor Prince, President

Attached:

Annual report and \$150.00 check for 2003