

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 OCT 27 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000049272

1. Entity Name

Michael & Maria Domingoes, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3534 A1A South

Suite, Apt. #, etc.

3. Mailing Address
3534 A1A South

Suite, Apt. #, etc.

REINSTATEMENT 03

DO NOT WRITE IN THIS SPACE

City & State
St. Augustine, FL

City & State
St. Augustine, FL

4. FEI Number
59-3322886

Applied For
Not Applicable

Zip #
32080

Country
USA

Zip
32080

Country
USA

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

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7. Name and Address of Current Registered Agent

Name
O'Connell, W.H. CPA

Street Address (P.O. Box Number is Not Acceptable)
2200 N. Ponce De Leon Blvd. Ste. #10

City St. Augustine FL Zip Code 32084

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

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
Domingoes, Michael W.
STREET ADDRESS
504 Hoot Owl Court
CITY-STATE-ZIP
St. Augustine, FL 32084

TITLE
NAME
Domingoes, Maria A.
STREET ADDRESS
504 Hoot Owl Court
CITY-STATE-ZIP
St. Augustine, FL 32084

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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

DATE

Payable Phone #

10/22/03 461-5788
904-471-6789

CR2E034B (12/01)

21 10/31

W. HENRY O'CONNELL

Certified Public Accountant

2200 N. Ponce De Leon Blvd. Suite 10

St. Augustine, FL 32084

Phone (904) 829-0082 Fax 904 829-5030 e-mail: taxwho1@bellsouth.net

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

Dear Agent:

Enclosed is the UBR for Michael and Maria Domingoes P.A. My client moved to a new address in 2002 and did not receive UBR's for 2003 or any reminder notices. As proof of the move I have included Evidence of Property Insurance and a Federal Tax Deposit Coupon. We have enclosed a check to cover the filing fee and a UBR with the correct mailing address. In no way did my client try to avoid paying the filing fee. Please reinstate this corporation as soon as possible with the original filing fee. If you have any further questions, please contact me at (904) 829-0082.

Sincerely,



W.H. O'Connell, CPA