

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000015575

1. Entity Name
KLAYMAN/ALEXANDER GROUP, INC.

FILED
Jul 11, 2000 8:00 am
Secretary of State

07-11-2000 90174 027 ***150.00

Principal Place of Business
15900 GLENISLE WAY
FT MYERS FL 33912

Mailing Address
15900 GLENISLE WAY
FT MYERS FL 33912



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0651842

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLAYMAN, BARRY
15900 GLENISLE WAY
FT MYERS FL 33912

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

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) ☐

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 PSC
NAME KLAYMAN-BARTON, BARRY
STREET ADDRESS 15900 GLEN ISLE WAY
CITY-ST-ZIP FT. MYERS FL 33912 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/5/00 941-561-3480

Attachment DT# P96000015575 00069253
KLAYMAN / ALEXANDER GROUP, INC.

Tel. 941-561-6711

15900 Glenisle Way. Fort Myers, Florida 33912

E-mail. klayalex@aol.com

Fax. 941-561-1877

July 5, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Klayman/Alexander Group, Inc.

To Whom It May Concern:

Please find enclosed the 2000 Uniform Business Report and a check for \$150.00 for the above named corporation.

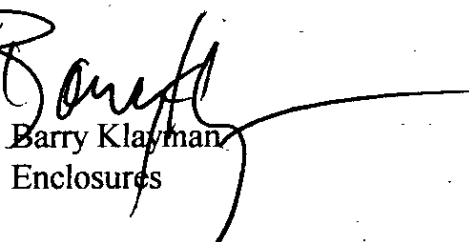
We respectfully request that you accept this check. We are unable to locate the original 2000 Uniform Business Report mailed to us in December 1999 as indicated by one of your representatives we spoke with today via telephone.

Additionally, we are an inactive corporation previously employing a Certified Public Accountant to handle these matters. Our CPA, who is a sole practitioner, was experiencing a traumatic family crisis, which ended in the death of a close family member two months ago. He usually handles these forms for us. A search of your records will indicate that our corporation has always filed forms on a timely bases and will continue to do so in the future.

Please consider the above circumstances, which were beyond our control.

Thank you for your consideration.

Sincerely,


Barry Klayman
Enclosures