

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

**FILED**  
**Jul 23, 2002 8:00 am**  
**Secretary of State**

07-23-2002 90321 003 \*\*\*150.00

DOCUMENT # **P96000019887** ✓

1. Entity Name

**KARMA & COMPANY OF Port ST. Lucie, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**10548 S. US 1**

Suite, Apt. #, etc.

3. Mailing Address

**10548 S. US 1**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**Port ST. Lucie, FL**

City & State

**Port ST. Lucie, FL**

4. FEI Number

**65-0650803**

Applied For

Not Applicable

Zip

**34952**

Country

**USA**

Zip

**34952**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

**JAMES Durante**

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

**10548 S. US 1**

City

**Port ST. Lucie**

FL

Zip Code

**34952**

**DO NOT WRITE  
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 date, if applicable.

**James Durante, Pres.**

**7/3/02**

(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 \$81.25**

**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 - ST - ZIP  
**President  
James Durante  
10548 S. US 1  
Port ST. Lucie, FL 34952**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
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

**James Durante**

**7/3/02 (772) 337-060**

Date

Daytime Phone #

CR2E034B (12/01)

# Karma & Company of Port St. Lucie, Inc.

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Attachment

July 12, 2002

# P960000P1887  
122349

Florida Department of State  
Katherine Harris  
Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Karma and Company of Port St Lucie, Inc.  
2002 UBR

To Whom It May Concern:

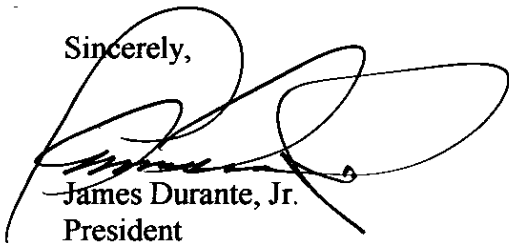
Enclosed is an executed copy of Karma's 2002 Uniform Business Report accompanied by a check in the amount of \$150.00.

Karma and Company has conducted business within Florida for over six years. Karma has always conducted business within the guidelines of state law. The UBR has always been submitted by the prescribed deadline.

Karma received its 2002 UBR report on Monday July 8, 2002 indicating that the report was not timely filed. Upon contacting my CPA, I have learned that he did not file Karma's UBR report as requested. Based on several other errors on his behalf, Karma has disengaged the firm and is currently seeking a new firm to comply with state regulatory requirements. Predicated on the above facts, I would request a one-time abatement of the penalties assessed for late filing.

We look forward to our continued relationship and successful operations with Florida.

Sincerely,



James Durante, Jr.  
President