

2000 UNIFORM BUSINESS REPORT (FBI)

PROAR

1

DOCUMENT # **P96000034867**

1. Entity Name
Belt On You, Inc.

FILED
00 FEB 15 PM 5:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2060 SW 90th Ave., #A
Plantation, FL 33324

2. Principal Place of Business
2060 SW 90th Ave.

3. Mailing Address
Suite, Apt. #, etc.
#A
City & State
Plantation, FL

Zip **33324** Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0663178

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

Name
Rafael Fhima

Street Address (P.O. Box Number is Not Acceptable)
2060 SW 90th Ave., #A

City **Plantation** **FL** Zip Code **33324**

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 **Rafael Fhima** (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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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		
TITLE	P/D <input type="checkbox"/> Delete	
NAME	Rafael Fhima	
STREET ADDRESS	2060 SW 90th Ave., #A	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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-02/21/00--010225-018
******300.00 ****300.00**

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: **Rafael Fhima** **PD**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

LS

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February 2, 2000

Belt On You, Inc.
2060 SW 90th Ave, #A
Plantation, FL 33324
(954) 557-3265

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

It has come to my attention that my corporation has been dissolved for not filing its 1999 Annual Report. I am writing to you this letter because I have no record of ever having received any notices for my 1999 Annual Report. The mailing address that you had for my corporation was wrong and I never received my Annual Report. You had my address as NW instead of SW 90th Ave.

As such, I would like to request an abatement of the penalties for late filing. Enclosed, you will find an updated Annual Report along with a check for \$300.00 to cover my 1999 & 2000 reports.

Thank you in advance for your attention to this matter.

Sincerely,



Rafael Fhima
President