

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 05, 2003 8:00 am
Secretary of State

08-05-2003 90074 013 ***150.00

DOCUMENT # P96000056862

1. Entity Name
DUNDEE FURNITURE, INC.



Principal Place of Business
**2310 CYPRESS BEND DRIVE S.
APT. 104-C
POMPANO BEACH FL 33069
US**

Mailing Address
**121 W. MERCHANT ST.
NEW BUFFALO MI 49117**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **36-2404224**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANKLE, LAWRENCE
2310 CYPRESS BEND DRIVE S.
APT. 104-C
POMPANO BEACH FL 33069**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **FRANKLE, HELENE**
STREET ADDRESS **2310 CYPRESS BEND DRIVE S., #104-C**
CITY-ST-ZIP **POMPANO BEACH FL 33069**

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

TITLE **SD** ☐ Delete
NAME **FRANKLE, LAWRENCE**
STREET ADDRESS **2310 CYPRESS BEND DRIVE S., #104-C**
CITY-ST-ZIP **POMPANO BEACH FL 33069**

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

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 Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE REQUIRED

7/31/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

frankle &
associates PLLC

Lawrence I. Frankle
*licensed in michigan,
indiana, illinois & california*

Sally A. Taylor
licensed in michigan & indiana

Wendy K. Walker
*licensed in michigan
& indiana*

*attorneys &
counselors at law*

121 w. merchant street
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telephone
269.469.4439

telecopier
269.469.4420

Attachment
80136206

July 31, 2003

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

Re: Dundee Furniture, Inc.
Document #P96000056862

Dear Sir or Madam:

Enclosed please find the 2003 Uniform Business Report for the above named corporation along with our filing fee in the amount of \$150.00. This is the first notice we received so we are requesting that the \$400.00 penalty fee be waived. In the future, if you could please make sure we receive this form prior to the May 1 deadline, we will timely file said report.

Thanking you in advance for your consideration of this request, I remain

Very truly yours,

Dundee Furniture, Inc.

Lawrence I. Frankle
Secretary