Applied For

\$8.75 Additional

Not Applicable

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

INDIAN ROCKS BEACH FL 33785-0103

P.O. BOX 103

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

INDIAN ROCKS BEACH FL 33785

2. Principal Place of Business

Suite, Apt. #, etc.

P.O. BOX 103

21



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600089559

DENT BUSTERS NORTH, INC.

22		27			}	5. Octubate of States Desired		F	ee Requ	ired	
City & State		City & State				6. Election Campaign Financing		\$5	. 00 м	ay Be	
23		28				Trust Fund Contribution	Ц,,,,,	Ac	ded to	Fees	
Zip	Country	Zip	Cour	ıtry		8. This corporation owes the currer	nt year 🛌	/	<u></u>		-
24	25	29	30			Intangible Personal Property.	X	Yes		10	_
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					_
. 01				81	Name						
LOVELACE, WILLIAM K ESQ				82 Stre		ss (P.O. Box Number is Not Acceptab	le)				\neg
2310 WEST BAY DRIVE											_
LARGO FL 33770					83						- }
•				84	City			85	Zip Co	de	\dashv
					•		FL	$\perp \perp$	<u> </u>		_
office or i	to the provisions of sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligation	f Florida. Such change was	authorized	lby1	the corporation	tion submits this statement for the puri 's board of directors. I hereby accept	oose of cha the appoint	nging ment	its regis as regis	tered tered	
SIGNATURE .	Class to the desired grant	and title if conflictable (A	IOTE: Pagister	ad An	gent signature require	ad when reinstation)	DATE	——			
12.	Signature, typed or printed name of registered agent of OFFICERS AND		13.	eu Ay	our signature require	ADDITIONS/CHANGES TO OFFI		DIR	ECTOR	5 IN 12	− §
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STREET ADDRESS			6.3 STF	REET	ADDRESS						
CITY-ST-ZIP			6.4 CIT								\dashv
14. 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 annual propert or supplemental annual report is true and occurate 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 tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter on an attachment with an address. SIGNATURE:											

FILED Aug 17, 1999 8:00 am Secretary of State

08-17-1999 90001 004 ***150.00



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 10/28/1996
 FEI Number

59-3409064

Division of Corporations Annual Reports Filings PO Box 6327 Tallahassee, Fl. 32314 606221-9000-4 P96600089559

Dear Division of Corporations,

Dent Busters North, Inc. FEIN #59-3409064

Period: 1998

Type Tax: 1988 Profit Annual Corporate Report

I recently received a 2nd Notice 1998 Profit Corporation Annual Report. The 2nd Notice stated that I owed a \$550 filing fee. The filing fee of \$550 is requested because I did not file my 1998 Profit Corporation Annual Report by May 1,1998. In reviewing the notice, I noticed that if I had filed the 1998 Profit Corporation Annual Report by May 1, 1998 the filing fee would have been \$150. I am writing this letter to because of my inexperience with the State of Florida operating procedures.

I incorporated Dent Busters North, Inc. on 10/28/96. In 1999, I continued to operate the business unaware of the Profit Corporation Annual Report filing requirements until I received the 2nd Notice 1998 Profit Corporation Annual Report on 8/1/99. This 2nd Notice was the first notice that I ever received from the Division of Corporations. I never received any notices at an earlier time. As soon as I received the 2nd Notice, I researched the notice and its filing requirements. I only then learned of the rules of compliance. So, now I'm making an earnest effort to properly comply with the filing requirements.

I've been applying due diligence in learning the filing requirements and conducting business accordinging to the laws to the best of my abilitites. According to 12--13.007 Grounds for Reasonable Cause for Compromise of Penalties (B), I believe the facts in my circumstance reflect the fact that I demonstrated reasonable care with my limited experience with Florida tax matters.

My past mistake of noncompliance: due to lack of experience with Florida tax matters and lack of understanding will not occur in the future. I now understand the filing process and related penalties in order to promote better compliance in the future. Due to the facts of this case, I request the Division of Corporations to consider a penalty reduction request. I request that I pay the \$150 filing fee for 1998. I would greatly appreciate your understanding. Hence forth, I promise to properly comply to all Division of Corporations rules and regulations. I am enclosing a check for the \$150 filing fee. Thanks again for your understanding.

Thank you very much,
Dent Busters North, Inc.