## **2002 UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

## P97000011509 **DOCUMENT#**

1. Entity Name

Principal Place of Business

LET3, INC.

Sep 19, 2002 8:00 am Secretary of State 09-19-2002 90158 009 \*\*\*150.00

**FILED** 

1660 SW ALBATROSS WAY PALM CITY FL 34990 US		1660 SW ALBATROSS WA' PALM CITY FL 34990 US			80139591		
2. Principal Place of Business		3. Mailing Address	3. Mailing Address				EDIIO IEII IEDI
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State	City & State		nn1/23928		oplied For ot Applicable
Zip	Country	Zip	Country	5. (	Certificate of Status Desired	\$8.75 Add	
.,	nt Registered Agent		7. Name and Address of New Registered Agent				
				" Name			
	DYE, JUDY A ALBATROSS WAY		Street Ac	Street Address (P.O. Box Number is Not Acceptable)			
	Y FL 34990				· · · · · ·		
			City	<del></del>	F	Zip Cod	e
the obligat	ions of registered agent.  Signature, typed or printed name of registered agentration is eligible to satisfy its Intangit	ent and title if applicable. (NOTE:	Registered Agent signature FEE IS \$550.0	e required when re	1		and accept
Tax filing r	equirement and elects to do so.	After September 13,	After September 13, 2002 Fee will be \$750 Make Check Payable to Department of St		10. Election Campaign Financing Trust Fund Contribution.		May Be to Fees
11.	OFFICERS AN	D DIRECTORS	12.	AD	DDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11
TITLE" NAME STREET ADDRESS CITY-ST-ZIP	PVST TAYLOR-DYE, JUDY A 1660 SW ALBATROSS WAY PALM CITY FL 34990	☐ Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
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☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

## CEM Consulting

Attachment # 1977

# 197000011509

September 18, 2002

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

Re:

2002 Uniform Business Report

LET3, Inc.

## Dear Sir or Madam:

I am writing this letter to request the enclosed 2002 Uniform Business Report be processed immediately. Pursuant to my telephone conference with your office this morning I am enclosing payment in the amount of \$150.00 for the filing fee (check # 4246). As I stated during my telephone conference I just received this second notice however I never received the first notice of the filing. Thank you for your prompt attention to this matter. If you require additional information or have questions, please do not hesitate to contact me at your convenience.

Sincerely

Judy A. T. Dye

President

LET3, Inc. d/b/a CEM Consulting

1660 SW Albatross Way

Palm City, FL 34990

Phone: 772-287-1992

**Enclosures**