**FILED** 

954 970 4874

7-5-03

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE:** 

DOCU  1. Entity Nam	DO3 FOR PROFIT IFORM BUSINESS MENT # P970000 D'S ENTERPRISES, INC.	REPOR	T (UBR)	Jul 14, 2003 Secretary o	of State
Principal Place 1804 W RIVER MARGATE FL	R DR 19	illing Address 04 W RIVER OR ARGATE FL 33063			### <b>1111   1111   1111</b>
2. Principal Place of Business		. Mailing Address			41 <b>6</b> 17 01204 10111 10201 1611 4051
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number 65-0740730	Applied For Not Applicable
Zip	Country Z	ip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regist	ered Agent		7. Name and Address of New Registered	Agent
DILLON, KAREN J 1804 W RIVER DR MARGATE FL 33063				(P.O. Box Number is Not Acceptable)	Zio Codo
			City	FL	Zip Code
After Se Make Check	Signature, typed or printed name of registered agent and title if  ILE NOW!!! FEE IS \$550.00  ptember 10, 2003 Fee will be \$750.00  c Payable to Florida Department of State		: Registered Agent signature require	9. Election Campaign Financing Trust Fund Contribution.  [ ]	\$5.00 May Be Added to Fees
10.	OFFICERS AND DIREC	<del></del>	11.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILLON, KAREN J 1804 W RIVER DR MARGATE FL 33063	☐ Delete	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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
indicated	on this report or supplemental report is true ar	nd accurate and that me to execute this report a other like empowered.	ny signature shall have the as required by Chapter 607	ection 119.07(3)(i), Florida Statutes. I further cer same legal effect as if made under oath; that I a 7, Florida Statutes; and that my name appears in	am an officer or director n Block 10 or Block 11 if

Attachment

July 5, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl. 32302-1500 90142129 P97000024878

To Whom it may conern,

I received a 60 Day Notice that I had not paid the annual corporate filing fee. I did not previously receive the package to file. I have always been faithful in filing this on time.

My corporation was established because my husband's employer required this in order for him to be employed. It seems his employer does not want to be responsible for withholding taxes, filing 1099s or W2s, etc. When my husband receives his check, I withhold the required taxes and the remainder is his paycheck. There is no profit. If I have to pay \$550 in filing fees there will be no paycheck.

Please waive the penalty for-late filing.—I have attached the completed 2003 For-Profit Corporation Uniform Business Report and a check for \$150.00. I sincerely hope that I will be notified that this is acceptable.

Thank you for your consideration in this matter.

Sincerely,

Karen J. Dillon

President

Tommy D's Enterprises Incorporated

1804 West River Drive

Margate, Fl. 33063

FEI number 65-0740730

Document # P97000024878

954 970-4874