

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

**FILED**  
**May 19, 2003 8:00 am**  
**Secretary of State**

05-19-2003 90201 022 \*\*\*150.00

0419128 AV

**DOCUMENT # P97000093691**

1. Entity Name

**SHERMAN-KALFIN ENTERPRISES, INC.**



Principal Place of Business  
**118 NORTH RIVER DR. WEST  
JUPITER FL 33458**

Mailing Address  
**118 NORTH RIVER DR. WEST  
JUPITER FL 33458**



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 **65-0791126**

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

**KALFIN, ALLAN M  
102 GEORGIAN CIRCLE  
JUPITER FL 33458**

7. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**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

TITLE **D** ☐ Delete  
NAME **SHERMAN, IVAN ARRON**  
STREET ADDRESS **118 NORTH RIVER DR. WEST**  
CITY-ST-ZIP **JUPITER FL 33458**

TITLE **D** ☐ Delete  
NAME **KALFIN, ALLAN M**  
STREET ADDRESS **102 GEORGIAN CIR. "NORTHFOLK"**  
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS  
CITY-ST-ZIP

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**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5/15/03 561 747 0979**  
Date Daytime Phone #

CR2E034 (10/02)

attachment

90136079

**SHERMAN KALFIN ENTERPRISES INC .**  
**102 , GEORGIAN CIRCLE , JUPITER , FLORIDA , 33458 .**

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

**5/15/03**

**Reference :P97000093691**

**Dear Sir / Madam :**

**Due to the fact that we were out of the country these last several months in Canada , We failed to file our 2003 uniform business report .**

**Realizing this situation on our return , we are submitting it late and ask to be excused the penalty if possible, due to the circumstances .**

**In the interim we enclose our check for the normal fee .**

**We hope you will look at our request favorably ,**

**Yours-Truly**

**Allan M. Kalfin .**

**cc: I . Sherman.**