2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # P97000104894 Jul 28, 2000 8:00 am Secretary of State 1. Entity Name TUPPENY ENTERPRISES, INC. 07-28-2000 90146 048 ***150.00 Principal Place of Business Mailing Address 2632 WESTMINSTER TERRACE 2632 WESTMINSTER TERRACE OVIEDO FL 32765 OVIEDO FL 32765 2. Principal Place of Business 3. Mailing Address 2632 WESTWINSTER 447 AUUN AVENNE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 59-3480818 Applied For tzsaida Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TUPPENY, PETER J Street Address (P.O. Box Number is Not Acceptable) **2632 WESTMINSTER TERRACE OVIEDO FL 32765** Zip Code City this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition ☐ Delete TITI F TITLE TUPPENY, PETER J NAME NAME **2632 WESTMINSTER TERRACE** STREET ADDRESS STREET ADDRESS **OVIEDO FL 32765** CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE 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 the 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 of each personnel.



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July 24, 2000

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

Re: Tuppeny Enterprises, Inc. /dba/ Furniture Medic #P9700104894

Dear Sirs:

Recently, I received a 2000 Uniform Business Report. The report indicated that I was to include a fee of \$550.00 dollars. This seemed high, so I referenced our prior payment of May of 99' and saw that we had paid \$150.00. I realized that we were being penalized for a late filing of this report and that this was the difference. We however, did not receive any paper work prior to this most recent notice to file this year.

Speaking with one of your customer service people I was told that these forms are typically sent out at the beginning of the year. This person indicated that I should enclose the amount of \$150.00 and that you may be willing to waive this penalty as we had not received any prior notice/forms to file.

Thankyou,

Peter J. Tuppeny

President\