

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90389 001 \*\*\*150.00  
 07-16-2002 90389 002 \*\*\*\*\*8.75

**DOCUMENT # P98000004365**

1. Entity Name  
**28/20 DESIGN, INC.**

Principal Place of Business  
**6355 METROWEST BLVD**  
**#290**  
**ORLANDO FL 32835**  
**US**

Mailing Address  
**6355 METROWEST BLVD**  
**#290**  
**ORLANDO FL 32835**  
**US**



2. Principal Place of Business  
**120 W. 6th Ave.**  
 Suite, Apt. #, etc.

3. Mailing Address  
**120 W. 6th Ave.**  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Windermere**  
 Zip  
**FL** Country

City & State  
**Windermere**  
 Zip  
**34786** Country

4. FEI Number **59-3488230**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**JOHNSTON, STEVEN E**  
**7700 HIDDEN IVY CT.**  
**ORLANDO FL 32819**

## 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSTON, STEVEN E 7700 HIDDEN IVY CT. ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHNSTON, SUSANNE P 7700 HIDDEN IVY CT. ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Suzanne Johnston 7.10.02 876.8725  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment P98000004365

97422

July 9, 2002

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32314

To Whom It May Concern:

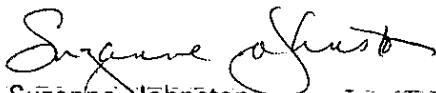
Re: 2820 Design, Inc. No. 59-3488230

I received my Uniform Business Report for 2002 and was shocked to see that the fee was \$550.00 rather than the usual \$150.00. After reviewing the FAQs, I understood why the amount was \$550.00, however, I never received the original report. The \$150.00 fee was never entered as a payable in my books. I noticed that the address you have on record is wrong, and I have corrected it.

I was told by your office that if I wrote a letter explaining that I never received the report, the late fee would be waived. I am enclosing a check in the amount of \$150.00 to reflect the original payment due. Please accept my apologies.

Thank you for your help.

Very truly yours,



Suzanne Johnston  
2820 Design, Inc.

