

# 2002 UNIFORM BUSINESS REPORT (UBR)

0076511 AV

DOCUMENT # P98000066992

1. Entity Name  
MASTER'S SHOPPE AMERICA, INC.

FILED

02 AUG 20 AM 8:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
9860 SOUTHERN BLVD  
WEST PALM BEACH BLVD 33411

Mailing Address  
9860 SOUTHERN BLVD  
WEST PALM BEACH BLVD FL 33411

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number 65-0853779  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
MURRO, ANTHONY D  
2845 NW TIMBERCREEK CIRCLE  
BOCA RATON FL 33431

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)

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	D MURRO, ANTHONY D 2845 N.W. TIMBERCREEK CR. BOCA RATON FL 33431 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURRO, THERESA A 2845 N.W. TIMBERCREEK CR. BOCA RATON FL 33431 <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
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2155 STONINGTON TERRACE WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2155 STONINGTON TERRACE WEST PALM BEACH, FL 33411
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: SIGNATURE OF REGISTERED AGENT 8/12/02 561-791-1773

CR2E034 (4/02)

*Attachment*



# The Master's Shoppe

AUGUST 12, 2002

FLORIDA DEPARTMENT OF STATE

RE: MASTER'S SHOPPE AMERICA, INC.

# P 98000066992

GENTLEMEN:

CONFIRMING OUR CONVERSATION WITH YOUR OFFICE TODAY, HERE IS OUR CHECK FOR \$150<sup>00</sup> FOR THE 2002 UNIFORM BUSINESS REPORT. (# 2007)

AS I EXPLAINED, WE HAVE HAD PROBLEMS WITH OUR ACCOUNTANT AND ASSUMED ALL NECESSARY REPORTS HAVE BEEN FILED (WE ARE CURRENTLY BETWEEN ACCOUNTANTS)

I HOPE YOU CAN ACCEPT THIS CHECK WITHOUT THE LATE FEES. I DO APPRECIATE YOUR ASSISTANCE

SINCERELY,

A handwritten signature in cursive script, appearing to read 'Amy K. Munn', with a long horizontal flourish extending to the right.