

2000 UNIFORM BUSINESS REPORT (UBR)

7/

DOCUMENT # P99000001260

1. Entity Name

CUSTOM ACCENTS, INC.

FILED
Aug 22, 2000 8:00 am
Secretary of State

08-22-2000 90004 013 ***400.00

07-17-2000 90116 025 ***150.00

Principal Place of Business

14115 7TH STREET
DADE CITY FL 33525

Mailing Address

14115 7TH STREET
DADE CITY FL 33525-4204

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

52-2137974

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAMORY, NANCY F
14115 7TH STREET
DADE CITY FL 33525

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.

SIGNATURE

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

(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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAMORY, NANCY F
14115 7TH STREET
DADE CITY FL 33525

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAMORY, SAM
14115 7TH STREET
DADE CITY FL 33525

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Nancy F. Hamory 6/27/00 352 567 3482
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

Attachment
D# N9400000 8555
[REDACTED] 80104723

Custom Accents, Inc.
14115 7th Street
Dade City, FL 33523
352-567-3482

Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500
Attn: Katherine Harris

June 27, 2000

Dear Ms. Harris,

I am contacting you regarding the Uniform Business Report. I am also requesting understanding regarding the late fee. We were counting on the experience and knowledge of our C.P.A. firm regarding these matters. We were under the understanding that they took care of such things. Much to our surprise and ignorance we found this not to be the case. I came here a week ago, only to find that this was due and not taken care of. We have a C.P.A. firm because we don't understand these matters. At this time I am enclosing a check for \$150.00. I am requesting your understanding and leniency in this matter. As you can see we are a new Corporation and are learning about the forms and fees. This situation will not repeat itself, as we now know our part and responsibility regarding this form.

Thank You for your time,

Cynthia Wagoner

Cynthia Wagoner
Office Manager