

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State
08-11-2003 90288 045 ***150.00

0137398 AT

DOCUMENT # P99000002363

1. Entity Name
PERMITS UNLIMITED, INC.



Principal Place of Business
**1611 - 17TH ST NW
WINTER HAVEN FL 33881**

Mailing Address
**1611 - 17TH ST NW
WINTER HAVEN FL 33881**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3548995**

Applied For
Not Applicable

Zip Country

Zip Country

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

**BROWN SPAIN, CYNTHIA
1611 - 17TH ST NW
WINTER HAVEN FL 33881**

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 \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☐ Delete
**BROWN SPAIN, CYNTHIA
1611 17TH ST. NW
WINTER HAVEN FL 33881**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T ☐ Delete
**SPAIN, DAVID
1611 - 17TH ST NW
WINTER HAVEN FL 33881**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S ☐ Delete
**SPAIN, DAVID
1611 - 17TH ST NW
WINTER HAVEN FL 33881**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

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 like empowered.

SIGNATURE:

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

8-4-03
Date

Daytime Phone #

CR2E034 (4/03)

Attachment#

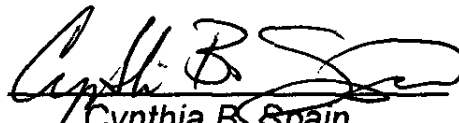
PERMITS UNLIMITED, INC.

86137605
P99000002363

1611 17th Street N.W.
Winter Haven, Florida 33881
Phone (863) 559-1464
Fax (863) 401-3822

August 4, 2004

Please except our renewal for Corporation @ \$150.00. We never received our renewal application. Our mail had been stolen, the Police Department has made an arrest and did recover some our of mail, but by law was unable to release it, or show it to us because it is being held as evidence. We are not even sure the renewal application was recovered. They mention bank statements and a couple of other items. Your understanding in this matter is greatly appreciated.


Cynthia B. Spain
President

8-4-03
Date