

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 26, 2001 8:00 am
Secretary of State

07-26-2001 90007 045 ***150.00

0048824 AV

DOCUMENT # P99000003605

1. Entity Name
INPRINT, INC.

Principal Place of Business Mailing Address
750 NE 114 ST **750 NE 114 ST**
BISC PK FL 33161 **BISC PK FL 33161**

00074306



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0894967** 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

PARKES, EVELYN F CPA
2240 PALM BEACH LAKES BOULEVARD
SUITE 100
WEST PALM BEACH FL 33409

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 \$550.00
After September 12, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **FIGUEROA, OLGA**
 STREET ADDRESS **750 N.E. 114TH ST.**
 CITY-ST-ZIP **BISCAYNE PARK FL 33161**

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

TITLE **SD** ☐ Delete
 NAME **FIGUEROA, RAYMOND**
 STREET ADDRESS **750 N.E. 114TH ST.**
 CITY-ST-ZIP **BISCAYNE PARK FL 33161**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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: *SENATJE FIGUEROA*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/01 3059041012
 Date Daytime Phone #

CR2E034 (5/01)

Attachment
Doc# P99000003605-C0074306
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida

RE: UBR- Doc P99000003605

Dear Sir/Madam

My business, INprint, Inc., has been incorporated a year and half. The first year my accountant filed the Uniform Business Report. However, she failed to inform me that I would have to file it myself from then on. It was not until I received the second form from the state that her office communicated this to me.

I would appreciate if you would waive the late fee of \$400, as this is my first deadline violation.

I am enclosing the signed UBR form and a check for the original filing fee of \$150. Please contact me if you have any questions.

Sincerely,



Olga Figueroa

Enc.