2002 UNIFORM BUSINESS REPORT (UBR)

Aug 05, 2002 8:00 am Secretary of State P99000011020 DOCUMENT # 1. Entity Name 08-05-2002 90009 021 ***150.00 AUTHORIZATION, BILLING, & COLLECTIONS, INC. Mailing Address Principal Place of Business 3275 NW 44TH STREET 3275 NW 44TH STREET 972780 APT. 5 APT. 5 FT, LAUDERDALE FL 33309 FT.LAUDERDALE FL 33309 3. Mailing Address 4270 N.W. 103rd Drive 2. Principal Place of Business 4270 N.W. 103rd Drive Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0895959 Not Applicable Coral Springs Coral Springs Country USA \$8.75 Additional 33065-1597 5. Certificate of Status Desired **วร์**ได้65−1597 Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Lisa M. Garro GARRO, LISA M Street Address (P.O. Box Number is Not Acceptable) 4270 N.W. 103rd Drive 3275 NW 44TH STREET APT, 5 FT.LAUDERDALE FL 33309 City Coral Springs 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 register Lisa M. Garro SIGNATURE (NOTE: Registered Agent signature required when reinstating) itle if applicable name of registered agent FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. X Change ☐ Addition ☐ Delete TITLE GARRO, LISA NAME NAME 4270 N.W. 103rd Drive 3275 NW 44TH STREET, APT. 5 STREET AODRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-7IP Coral Springs, FL 33065-1597 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 v with all other like empowered

CITY-ST-ZIP

CITY-ST-7IP

FILED

Hachment

JOHN A. SMITH, P.A.

#P99000011020

CERTIFIED PUBLIC ACCOUNTANT

MEMBER:

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

CORAL SPRINGS PROFESSIONAL CENTER 10231 WEST SAMPLE ROAD CORAL SPRINGS, FLORIDA 33065 (954) 796-8560 FAX (954) 796-8202

July 29, 2002

Florida Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

Ref: Authorization, Billing & Collections, Inc. Document #99000011020

Dear Sir or Madam,

I am writing you about the above corporation. The corporation received a second notice on its 2002 Uniform Business Report. The original Uniform Business Report was mailed together with payment on April 20, 2002. Since the report was hand delivered to -the United States Post Office, we assumed that it would be delivered timely. This is the first notice that we have had that indicated there was a problem.

At this time we are respectfully requesting that the \$400 penalty be waived. In the future we will be sure to send them in certified to insure that they will not be lost in the mail.

Thanking you in advance for your cooperation in this matter.

Respectfully submitted

John A. Smith

Certified Public Accountant