

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90152 001 ***150.00

DOCUMENT # P99000015892

1. Entity Name
Neat Kids Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1603 Lake Ave

3. Mailing Address

1603 Lake Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Panama City FL

City & State

Panama City FL

4. FEI Number

593559241

Applied For

Not Applicable

Zip

32401

Country

Bay

Zip

32401

Country

Bay

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Elizabeth J. Walters

Street Address (P.O. Box Number is Not Acceptable)

221 McKenzie Ave

City

Panama City

FL

Zip Code

32401

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 DPS
NAME Deborah D Lukow
STREET ADDRESS 1603 Lake Ave
CITY-ST-ZIP Panama City FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME Harmony Grace
STREET ADDRESS 1603 Lake Ave
CITY-ST-ZIP Panama City FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME Cesey Griffin
STREET ADDRESS 1603 Lake Ave
CITY-ST-ZIP Panama City FL 32401

TITLE
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CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah D Lukow

6/6/02

850 785-8444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment
Document #
PPA000015892
117650

Dear Sir,

My name is Deborah Lewkow I am the owner of Neat Niks INC. I contacted your office and talked to Matt on 5/31/02. My problem is this, Last year my attorney submitted the wrong O address to your office as a result I never recieved my annual repot, so my corperation was dissolved. We had to redo the corperation as a result. We changed the address, but I never recieved my annual report this

my home address instead of the P.O. Box. Please call me if there is any problems. I am sorry for the delay and thank you for your patience

Deborah Lewkow

1603 Lake Ave
Panama City Fl.
32401
850-785-8444