FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT 18 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000036291

1. Entity Name

Frankurt Corporation

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
9553 Harding Ave.	9553 Harding Ave.
Suite, Apt. #, etc. Suite 205	Suite, Apt. #, etc. Suite 205
City & State Surfside, FL	City & State Surfside, FL
Zip 33154 Country USA	Zip 33154 Country USA

4. FEI Number 65-0912478 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Sidney Delarosa

Street Address (P.O. Box Number is Not Acceptable) 9553 Harding Ave

Suite 205

City Surfside FL Zip Code 33154

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 _____ 10-16-02

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	P.
NAME	Delarosa, Sidney
STREET ADDRESS	9801 Collins Ave Apt. 14-I
CITY-ST-ZIP	Bal Harbour, FL 33154
TITLE	VP
NAME	Delarosa, Francine
STREET ADDRESS	9801 Collins Ave. Apt. 14-I
CITY-ST-ZIP	Bal Harbour, FL 33154
TITLE	
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CR2E034B (12/01)

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: _____ 10-16-02 (305) 867-9090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

jp 10/18/02

October 16, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Based on a conversation with a Department of State agent, I am sending this letter along with a completed Uniform Business Report and check (#1715) as a request for reinstatement of Frankurt Corporation. On January 18, 2001 a Uniform Business Report with the appropriate payment was sent. It recently came to our attention that the forms were never received and therefore never filed. Please accept this new completed UBR form and payment and update our file accordingly. Thank you very much for your prompt attention regarding this matter.

Sincerely,

Sidney Delarosa
President
Frankurt Corporation