

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000046511

1. Entity Name  
SAUL FROMKIN ALL BAND INSTRUMENTS, INC.

(R)

**FILED**  
**Aug 16, 2000 8:00 am**  
**Secretary of State**

08-16-2000 90002 031 \*\*\*150.00

Principal Place of Business  
3909 TAMiami TRAIL SOUTH  
SARASOTA FL 34231

Mailing Address  
3909 TAMiami TRAIL SOUTH  
SARASOTA FL 34231

ADD / SUB /



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
4433 S. TAMiami TRAIL  
Suite, Apt. #, etc.

3. Mailing Address  
4433 S. TAMiami TRAIL  
Suite, Apt. #, etc.

City & State  
SARASOTA FL  
Zip  
34231  
Country  
USA

City & State  
SARASOTA FL  
Zip  
34231  
Country  
USA

4. FEI Number  
65-0926427  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
LIKENS, CHRISTOPHER A  
1800 2ND ST. #919  
SARASOTA FL 34236

7. Name and Address of New Registered Agent  
Name  
LARRY GEIMER  
Street Address (P.O. Box Number is Not Acceptable)  
1515 RINGLING BLVD, SUITE 890  
City  
SARASOTA FL Zip Code  
34236

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] (NOTE: Registered Agent signature required when reinstating) DATE 7/28/00

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 13, 2000 Min. 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
SARUL FROMKIN 4433 S. TAMiami TRAIL SARASOTA FL 34231	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D P S T SAUL FROMKIN 4433 S. TAMiami TRAIL SARASOTA FL 34231	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
VP KEITH DILLON 4433 S. TAMiami TRAIL SARASOTA FL 34231	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: [Signature] DATE 7/28/00 941/925-4997  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/00)

Attachment P99000046511  
AUG 7 2000

Saul Fromkin All Band Instruments, Inc.  
4433 S. Tamiami Tr.  
Sarasota, FL 34231

July 28, 2000

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

Re: Uniform Business Report

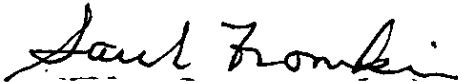
Dear Sir or Madam:

The purpose of this letter is to request abatement of the \$400 late filing fee for the 2000 Uniform Business Report.

The reason for this request is that no prior report had ever been received. The attorney who had volunteered his services in incorporating this business had used an incorrect address. As a result, no mail has been received. This is our first year as a corporation, so we were totally unaware of the existence of this form.

We enclose payment of \$150, which is the normal filing fee. Thank you in advance for your consideration and assistance in this matter.

Sincerely,



Saul Fromkin

Enclosures