

DOCUMENT # P99000056136

1. Entity Name

WIZARDS OF WINDOW TREATMENTS AND DECOR, INC.

R

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90010 023 ***150.00

Principal Place of Business

2424 N. ATLANTIC BOULEVARD
FORT LAUDERDALE FL 33305

Mailing Address

2424 N. ATLANTIC BOULEVARD
FORT LAUDERDALE FL 33305

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0935584

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLEIN, MARTIN
2424 N. ATLANTIC BOULEVARD
FORT LAUDERDALE FL 33305

7. Name and Address of New Registered Agent

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 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 ☐ Delete
NAME D
STREET ADDRESS KLEIN, MARTIN
CITY-ST-ZIP 2424 N. ATLANTIC BOULEVARD
FORT LAUDERDALE FL 33305

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☐ Addition
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: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

A0068407

ATTACHMENT

P99000056136

BRANSTETTER TAX & FINANCIAL CORP.

400 South Dixie Highway, Suite 423
The Arbor Building
Boca Raton, Florida 33432

July 14, 2000

Telephone: 561-368-0282

Fax: 561-368-4513

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

RE: Wizards of Window Treatments and Decor, Inc.
#P99000056136

Dear Sir or Madam:

My client referenced above has asked me to correspond on his behalf regarding the late filing of the enclosed 2000 Uniform Business Report. We have enclosed the 2000 Report, along with the annual fee in the amount of \$150.00.

My client asks to be relieved from the late filing penalty due to the fact he did not receive the first report mailed to him in January. As a new corporation in 1999, he was unaware of the annual filing requirement deadline and when he received this second report, he came to my office to inquire about the necessity of filing this report. He is now aware of the yearly filing requirements and due dates.

Please process this report and payment to satisfy his filing requirement for 2000. Your consideration in this matter is greatly appreciated.

Sincerely,



Tammy L. Schmidt
Accountant

t/s

encl.