

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 27, 2001 8:00 am
Secretary of State

07-27-2001 90001 016 ***150.00

DOCUMENT # **P-99000056782**

1. Entity Name

Authorized Appliance Repair, Inc

Principal Place of Business

Mailing Address

10435 Lehman Rd 10435 Lehman Rd
Orlando, FL 32825 Orlando, FL 32825

2. Principal Place of Business

10435 Lehman
 Suite, Apt. #, etc.

3. Mailing Address

10435 Lehman Rd
 Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

4. FFL Number

59-358888 2

Applied For

Not Applicable

Zip

32825

Country

Orange

Zip

32825

Country

Orange

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Gene P Glaser
10435 Lehman Rd
Orlando, FL 32825

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

Gene P Glaser

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-20-01

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 \$150.00

After MAY 1, 2001 Fee will be \$550.00

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

President
Gene P Glaser
10435 Lehman, Orlando, FL 32825

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change

☐ Addition

Gene P Glaser
10435 Lehman, Orlando, FL 32825

☐ Delete

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☐ Change

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☐ Change

☐ 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:

Gene P Glaser

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gene P Glaser 7-20-01 407-467-0374

CR2E034 (11/00)

Attachment
DH9900056783
A079650

Division of Corporations

I never received the
business report for my
corporation. I found out
that I need to update
the corp and pay fee.
The FEI # is 59-3409357.

Gene P. Glasser
President

1 person of
Gene Glasser S. Corp.
10435 Lemna Rd
Orlando, FL 32825
407-482-5555



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 6, 2001

AUTHORIZED APPLIANCE REPAIR, INC.
10435 LEHMAN RD
ORLANDO, FL 32825

SUBJECT: AUTHORIZED APPLIANCE REPAIR, INC.
Ref. Number: P99000056782

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety, and resubmitted with the filing fee.

Please include your letter stating the report was not received when submitting the completed uniform business report. This will allow our office to waive the \$400.00 late fee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 201A00040189

Attachment
A0079650