FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Aug 13, 2002 8:00 am Secretary of State

	Secretary or Sta
IENT # P99000084755	00 12 2002 0022 4 022 ***1 50 6
16141 # 199000004199	1 08-13-2002 90224 022 ***150 0

1. Entity Na	IMENI# P9900008	14755			08-13-2002 90224 022 ***150.00	
1	GRACE WEBER, P.A			,		
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		<u>-</u>		•		
	O NOT WRITE	IN THIS S	PACE		A	
		<u> </u>			974020	
	Place of Business IE 23 STREET	3. Mailing Address SAME			_	
Suite, Ap	et. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & Sta		City & State			4. FEI Number Applied For	7
POMPAN Zip	O BEACH, FL	Zip	Country		65-0951375 Not Applicable	1
33062	USA	Ζίρ	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
			Name		7. Name and Address of Current Registered Agent	1
وريس در المستد عاصد	DO NOT W	DITE	MAF	RY G.	WEBER	}
	•		287	Address 1 NE	(P.O. Box Number is Not Acceptable) 23 STREET	
	IN THIS SF	ACE	.			
			City POM	IPANO	BEACH FL 33062	1
8. The above	e named entity submits this stateme	ent for the purpose of char	nging its registered	office or r	egistered agent, or both, in the State of Florida.	1
SIGNATURE	I Mariel Will	w	MARY G.	WEB	ER /8-6-02	
	Signature, typed of printed name of regis	stered agent and title if applic			pent signature required when reinstating) DATE	
	oration is eligible to satisfy its Intang		1 - May 1 Fee is \$1 Way 1, Fee is \$550.		40. Election Connector Figure 65.00	<i>!</i>
	requirement and elects to do so.	¬ I Amei	nded UBR is \$61.2 syable to Departme	5	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
11.	OFFICERS AND		yable to Departin	ent or sta	te	
TITLE	DIRECTOR		ΠπLE			CR2E034B (12/01)
NAME STREET ADDRESS	MARY G. WEBER 2871 NE 23 STRE	EET	NAME STREET ADDRES	ss		B (1
CITY - ST - ZIP	POMPANO BEACH,		CITY + ST - ZIP			803
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CITY - ST - ZIP			CITY - ST - ZIP	1		
an officer o	i indicated on this report or supplem	iental report is true and ai eceiver or trustee empow	ccurate and that my ered to execute this	r eignatura	n Section 119.07(3)(i), Florida Statutes. I further certify that the shall have the same legal effect as if made under oath; that I am required by Chapter 607, Florida Statutes; and that my name	
SIGNATU	JRE: <u>V Mary B</u>	Welev	MARY G.	WEBE	CR 18-6-02 1954-946-870	0
	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNIN	IG OFFICER OR DIRE	CTOR	Date Daytime Phone # /= X7 /5	>

THE Minne STEWART & ASSOCIATES, CPA'S, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

ANGOROS STATES

August 6; 2002

Florida Department of State Division of Corporations Annual Report

P.O. Box-1500

Tallahassee, FL 32302-1500

RE: Mary Grace Weber, P.A.

Dear Sir or Madam:

We are enclosing the completed and signed 2002 Uniform Business Report for the above referenced client. Also enclosed is their check in payment of the annual fee of \$150.00

In reviewing our client's accounting records, we discovered they had not paid their annual fee. Our client advised us they had not received the first notice regarding their 2002 annual fee. We were advised by your department in a telephone conversation to follow this procedure since the client did not receive the original annual corporate report form

Sincerely

STEWART & ASSOCIATES, CPA'S, P.A.

Joyce T. Stewart

Certified Public Accountant

Enclosures

CC: Mary Grace Weber, P.A.

JTS:mr