

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 10, 2001 8:00 am
Secretary of State

08-10-2001 90001 036 ***150.00

DOCUMENT # **799000088441**

1. Entity Name

Novelty Moose

Principal Place of Business

Mailing Address

**10740 NW 5 St.
 Plantation, FL 33324**

A0080841

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Arcan Hallman
 10740 NW 5 St.
 Plantation, FL 33324**

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 12, 2001 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME **Arcan Hallman** ☐ Delete
 STREET ADDRESS **10740 NW 5 St.**
 CITY-ST-ZIP **Plantation, FL 33324**

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

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

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TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-1-01

Date

(954) 370-5166

Daytime Phone #

CR2E034 (5/01)

Attachment
#P990008841
A0880841

August 01, 2001

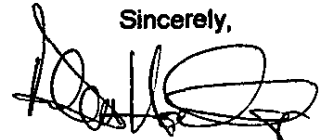
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE:NOVELTY MOUSE

To whom it may concern:

Recently, after almost a year of inactivity Novelty Mouse Inc, has sparked some interest of alleged investors. In reviewing my paperwork I, Arlan Hallman living at 10740 NW 5 ST. Plantation, FL 33324 never received the filing for the above mentioned corporation that I opened 1 year prior. I as principal of the corporation I am asking for the delinquent fee to be waived due to a possible loss by the U.S. Mail. Enclosed please find the original filing fee of \$150.00. I respectfully apologize for any inconvenience in regards to this matter. Please confirm the above address with your own in your data base.

Sincerely,



Arlan Hallman