200	Í ÚNIFORM BUS	INESS REPO	RT	(URR).		,			
DOCUMENT # P99000093740						FILED			
1. Entity Non	FOSTER ENTERPRIS	ES OF BROWA	RD C	OUNTY,	INC.	02 JUN -5	AM 10: 48	}	
	***************************************		••••			SECRETARY	OF STATE		
-	ce of Business	Meiling Address				TALLAHASSEE	, FLORIDA	i	
	S W 89th, AVENUE	5140 S W			ı	•			
3332	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	COOPER C 33328.	ITY,	F LOK ID					
2. Principal f	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1				
City & State		City & State		· · · · · · · · · · · · · · · · · · ·	4. FEI Number				
Zip	Country	Zip	Count	ıy	5. Certil	icate of Status Desired	\$8.75 A		
	6. Name and Address of Current I	Registered Agent			7. Nam	and Address of New Register			
FOSTER, PAUL E.				Name					
5140	S W 89th AVENUE	2222		Street Address	(P.O. Box N	úmber is Not Acceptable)		-	
COOPER CITY, FLORIDA, 33328									
				C#y			L Zin Co	de	
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or registe	ered agent, o	or both, in the State of Florida.			
SIGNATURE	Signature, typed or printed reason of registered expect o	STORN refractions & act box	- Parcial and	Agent signature require	uf afren neinstelh	Q) CM			
9. This corpy	oration is eligible to satisfy its Intengible	FILE NOW!	*****						
Tax filing s	requirement and elects to do so.	After MAY 1, 20 Make Check Payeb	01 Fee v	will be \$550.00		 Election Campaign Financing Trust Fund Contribution. 	S5.	00 May Be id to Fees	
11.	OFFICERS AND I	DIRECTORS Delse	12.		ADDITE	ONS/CHANGES TO OFFICERS			
HAME	FOSTER, PAUL E.		NAME	3		3000058 -06/19/1	675 320106	- -5 Addition . 9007	
STREET ADDRESS CITY-ST-ZIP	SI40 3 W OJER III			T ADORESS 5T-ZIP		****30().00 **	**300.00	
TITLE	GOOPER CITY, FLO	RIDA 33328	BRLE	31-EF	·····	······································	02-0106 0.00 **	☐ Addition	
NAME		L. Delous	HAME	1			CT ONNING		
STREET ADURESS GETY-SE-ZEP				TAGGRESS ST-729	-	•		ļ	
nne		☐ Delete	TIRLE				☐ Change	Addition	
NAME STREET ADDRESS			NAME STRIE	T ADDRESS					
CITY-SI-ZIP	·						•		
		·	CITY-	ST- 21P					
THUE		☐ Delate	TRILE				Change	Addition	
NAME STREET ADDRESS		☐ Delate	TITLE NAME				Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREE CITY-S	T ADORESS		·			
NAME STREET ADDRESS		☐ Delete	TITLE NAME STHEE	T ADORESS		·	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-20P TITLE NAME STREET ADDRESS			TITLE NAME STREE CITY-S TITLE NAME STREE	T ADDRESS T - ZIP					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Delete	THRE NAME STHEE CITY-S HAME STREE CITY-S	T ADDRESS T - ZIP		·	Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME THEE NAME			TRLE NAME SHEE CHY-S TITLE HAME STREE CHY-S TITLE NAME	T ADDRESS \$1-209 T ADDRESS \$1-209					
NAME STREET ADDRESS CITY-ST-ZIP TITLE TABLE THE TABLESS CITY-ST-ZIP TITLE		☐ Delete	TRLE NAME SHEE CHY-S TITLE HAME STREE CHY-S TITLE NAME	T ADDRESS ST-ZP T ADDRESS ST-ZP T ADDRESS ST-ZP			Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. I heneby c indicated of the con-	pertify that the information supplied with on this report or supplemental report is poration or the receiver or fustee empo	☐ Delate ☐ Delate ☐ Delate ☐ this filing does not qualify for true and accurate and the record	THE NAME SHEE CITY-S THE NAME STREE CITY-S THE SIRCE SHEE CHY-S THE STREE CHY-S THE S THE S TH	T ADDRESS ST-ZP T ADDRESS ST-ZP T ADDRESS ST-ZP sption stated in S pre shall have the	same legal	effect as if made under oath; the	Change Change	Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. I heneby c indicated of the con-	pertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w	☐ Delate ☐ Delate ☐ Delate ☐ this filing does not qualify for true and accurate and the record	THE NAME SHEE CITY-S THE NAME STREE CITY-S THE SIRCE SHEE CHY-S THE STREE CHY-S THE S THE S TH	T ADDRESS ST-ZP T ADDRESS ST-ZP T ADDRESS ST-ZP sption stated in S pre shall have the	same legal	effect as if made under oath; the	Change Change	Addition Addition	

aring BOOKKEEPING SERVICE, INC.

2

5795 Orange Drive, Davie, FL 33314 Dade (305) 895-3466 • Broward (954) 792-5075 • FAX (954) 792-5062

INCOME TAX • CORPORATE RETURNS • PARTNERSHIP • SMALL BUSINESS

July 28, 2001

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P O BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

RE: Foster Enterprises Of Broward County, Inc. 5140 S W 89th Avenue Cooper City, Florida 33328 EIN # 65-1102664

To Whom It May Concern:

In reviewing Mr. Foster half year business books, for Foster Enterprises Of Broward County Inc., we noticed that the Uniform Business report was not filed and /or paid in May of 2001. In questioning Mr. Foster, is stated he did not receive the report and thus did not pay the \$ 150.00 due, This is Mr. Foster first corporation and his first time filing corporate documents, he was not aware that he would have to pay a Uniform Business Report each year that his corporation is in business. The person that helped him incorporate was not very informed on the information need to be completed each year. We have started doing the business books for Mr. Foster and Foster Enterprises Of Broward County, Inc. and are requesting an abatement of the penalties due. Please find enclosed Foster Enterprises of Broward County, Inc. check for \$ 150.00, check #1945.

Thank you in advance for your time and consideration in this matter.

Sincerely,

Jeannie Murphy

MARING BOOKKEEPING SERVICE, INC.

Enclosed: Checke JMM/jmm