

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S21910

1. Entity Name

B.J. DICK, INC.

Principal Place of Business

8110 S.W. 78TH STREET
MIAMI FL 33143
US

Mailing Address

8110 S.W. 78TH STREET
MIAMI FL 33143
US

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 65-0235280

Applied For

Not Applicable

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

DICK, SHARON M
8110 S.W. 78TH STREET
MIAMI FL 33143

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.

(NOT: Registered Agent's 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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME DICK, SHARON
STREET ADDRESS 8110 S.W. 78TH STREET
CITY-ST-ZIP MIAMI FL 33143

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
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 the 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 #

FILED
Jun 07, 2001 8:00 am
Secretary of State

06-07-2001 90004 049 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

Attachment
521910
772401
CASS, LEVY & LEONE, L.C.
Certified Public Accountants and Consultants
440 Columbia Drive, Suite 500, West Palm Beach, FL 33409

MARTIN CASS, CPA
HOWARD S. LEVY, CPA
MICHAEL S. LEONE, CPA

TEL (561) 689-7888
FAX (561) 689-0478
www.casslevy.com

May 29, 2001

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

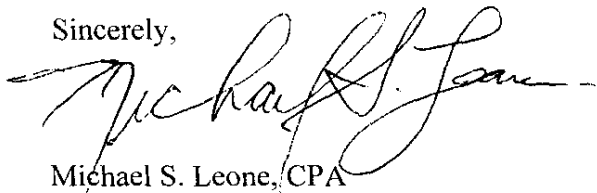
Re: B.J. Dick, Inc.
FIN: 65-0235280

Dear Sir or Madam:

On behalf of our client, we kindly request that the \$400 additional filing fee be waived based upon the following facts and circumstances. Barry J. Dick formed the above named Florida corporation. Unfortunately, Mr. Dick recently passed away and his surviving spouse has been maintaining the books and records of this corporation since that time. We just became aware that the Uniform Business Report for 2001 had not been filled and immediately informed her to file it. In light of these extenuating circumstances, we ask that you waive the \$400 penalty for filing after May1, 2001. Enclosed is the 2001 Uniform Business Report with a check for \$150. Your thoughtful consideration of this request will be greatly appreciated.

If you have any questions, please do not hesitate to call me.

Sincerely,



Michael S. Leone, CPA

Enclosure