## FILED 2002 UNIFORM BUSINESS REPORT (UBR) Aug 19, 2002 8:00 am Secretary of State DOCUMENT # S26153 1. Entity Name 08-19-2002 90127 034 \*\*\*150.00 FLORIDA AMUSEMENTS & ENTERTAINMENT, INC. Principal Place of Business Mailing Address 9060 W STATE RD 84 9060 W STATE RD 84 DAVIE FL 33324 DAVIE FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0248233 Not Applicable Žip Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TESSER, ARNOLD Street Address (P.O. Box Number is Not Acceptable) 9060 W STATE RD 84 DAVIE FL 33324 City Zip Code FL 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, lyped or printed name of registered agent and little if applicable. (NO1E: Begislered Agent signature required when reinstalling) 9. This corporation is eligible to satisfy its Intangible FILE NOWIN FEE IS \$150.00 Tax filing requirement and elects to do so. After May 1,2002 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete 1/D F ☐ Change Addition NAME TESSER, ARNOLD NAME STREET ADDRESS 9060 W STATE RD 84 STREET ADDRESS CITY-ST-ZIP DAVIE FL CITY-ST-7IP TITLE ☐ Defete IIIIF ☐ Change NAME Addition BENKENDORF, STUART NAME STREET ADDRESS 9060 W STATE RD 84 STREET ADDRESS CITY-ST-ZIP DAVIE FL CHY-SI-7P TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CHY-SI-ZIP [D] Defete 11111 NAME []] Change []] Addition NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CHY St-ZIP TETLE C Ocicle 2111 F NAME ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIF CHY-SI-ZIP ITLE ☐ Delete 11111 NAME ☐ Change

13. Thereby 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 the corporation or an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Addition

Attachments

DIANE E. SCLAR

# 526/53

915260

CERTIFIED PUBLIC ACCOUNTANT

8360 W. OAKLAND PARK BLVD., SUITE 302 SUNRISE, FLORIDA 33351

> TELEPHONE (954) 742-9284 FAX NO. (954) 742-7686

August 15, 2002

Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: 2002 Uniform Business Report

To the Department of State:

We are enclosing a copy of the first notice of the 2002 Uniform Business Report which was mailed to you with our check number 1100. This account is only reconciled once a year so we had no idea that the check and the original filing was not received by you until the second notice arrived.

Also enclosed is a copy of the sheet of check stubs where you can see that the original check #1100 was dated February 14, 2002. We have also enclosed a copy of our February bank statement where you can see that the prior and subsequent checks, #s 1099 and #1101 cleared in February. We have no explanantion how the mailing to you was lost. Clearly this is what happened.

We respectfully request that you accept our replacement check # 1116 in replacement of # 1100 which never cleared and waive the additional \$ 400 filing requirement.

Thank you for your cooperation.

Very truly yours,

Diane E. Sclar, CPA

encis.

cc: Florida Amusements & Entertainment, Inc.

Attachment # 526/3 1100 TOTAL 11119 55 THIS CHECK 150 00 OTHER TRANS +/ BALANCE 1101 TOTAL THIS CHECK 226 OTHER TRANS. +/-TAX DESIGNBLE D BALANCE 1102 2/10/02 TOTAL THIS CHECK 500 OTHER TRANS. +/-DEDUCTIBLE |

10243 55

BALANCE



**Business Checking** 

2000006266697 036 140

172,885

la Harilan Hariabladalah FLORIDA AMUSEMENT 9060 SR 84 DAVIE FL 33324

# 526 153

## **Business Checking**

2/01/2002 thru 2/28/2002

Account number:

2000006266697

Account holder(s):

FLORIDA AMUSEMENT

Taxpayer ID Number:

650248233

**Account Summary** 

\$11,393.25 Opening balance 2/01 Deposits and other credits 3,477.40 + 3,477.10 -Checks Closing balance 2/28 \$11,393.55

## **Deposits and Other Credits**

Date

Amount Description

2/07 3,477.40 **DEPOSIT** 

Total \$3,477.40

## Checks

Number	Amount	Date	Number	Amount	Date	Number	Amount	Date
1097	1,708.23	2/26	1101*	226.00 \$3.477.10	2/27			
1099*	1,542.87	2/04	Total	\$3,477.10				,

Indicates a break in check number sequence

Daily Palance Summany

Daily Dalance Sum	Amount	Dates	Amount	Dates Amount
2/04	9,850.38	2/2 <del>6</del>	11,619.55	
2/07	13,327.78	2/27	11,393.55	