

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S26434

1. Entity Name

LOEHMANN'S PLAZA CLEANERS, INC.

12

FILED

Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90020 019 ***150.00

Principal Place of Business

CAMPUS WALK CENTER
2551 DREW STREET, STE. 103
CLEARWATER FL 34625

Mailing Address

CAMPUS WALK CENTER
2551 DREW STREET, STE. 103
CLEARWATER FL 34625

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3052846

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

LOMBARDO, DANIELE
2551 DREW ST.
SSUITE 103
CLEARWATER FL 34625

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 13, 2000 Min. 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	PVS	<input type="checkbox"/> Delete
NAME	LOMBARDO, DANIELE	
STREET ADDRESS	2551 DREW ST. SUITE 103	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LOMBARDO, DANIELE	
STREET ADDRESS	2551 DREW ST. SUITE 103	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-5-00 797-7081

CR2E034 (5/00)

Attachment
DH#526434
DCW69783

Dear Sir or Madam,

I recently received a late filing fee for \$550.00. I'm writing to you to ask for your leniency on this late payment. I remember paying this fee when I started here one year ago but since then I have no recollection of ever receiving a bill. This is my first year in business and I am not used to the different notices. It has been a trying year, and a hefty fee such as this one really hurts. I have no records of the original filing fee that was issued in January. Perhaps it was misrouted. I don't know what else to say, only that I pay all my bills in a timely manner, and I have no reason to avoid payment on a notice with a \$400 late fee. I am asking for your understanding and benevolence. I will certainly be aware of this filing fee in the future. I am asking for the mercy of the state, to please rescind this late fee of \$400 for a first time business owner.

Sincerely,

Daniel Lombardo
Owner / Operator
Loehmann's Plaza Cleaners
DBA: Campus Walk Cleaners

Campus Walk Plaza
2551 Drew St. Suite 103
Clearwater, FL. 33765
727-797-7081