## 2001 UNIFORM BUSINESS REPORT (URB)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P9600062290  1. Entity Name S17TPA, CORP.					142	
					FILED	
Principal Place of Business Mailing Address					02 AUG 14 PM 12: 09	
5101 NW 79 AVE MIAMI FL 33166		5101 NW 79 AVE MIAMI FL 33166			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 15 Applied For 47-0879696 Not Applied by	
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Re	egistered Agent	Name		7. Name and Address of New Registered Agent	
BONVECCHIO, ALAIN M				dalan 172 1	20 Cau Number in New Assessment	
	I N.W 79TH AVENUE VII FL 33166		Street Ad	Street Address (P.O. Box Number is Not Acceptable)		
MA	TH 1 L 33 100					
	* 1 * 9 ********		City		FL Zip Code	
8. The above	e named entity submits this statement for t	he purpose of changing its re	egistered office or	registered	ed agent, or both, in the State of Florida.	
SIGNATURE		-				
	Signature, typed or printed name of registered agent and		Registered Agent signatu		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 Sta		50.00	10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees	
11.	· OFFICERS AND DI		12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BONVECCHIO, ALAIN M 5101 N.W. 79TH AVENUE MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Change □ Addition □□□□□□742841□□ -08/29/0201050034 ****158.75 ****158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BONVECCHIO C., ALAIN 5101 N.W. 79TH AVENUE MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Change □ Addition □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS BONVECCHIO C., ADOLFO H 5101 N.W. 79TH AVENUE MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BONVECCHIO C., ARIANNE B 5101 N.W. 79TH AVENUE MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
indicated of the cor	certify that the information supplied with the on this report or supplemental report is truporation or the receiver or trustee empower or on an attachment with an address, with	ue and accurate and that my	ne exemption state signature shall ha dequired by Char	ed in Section ve the sand oter 607, F	tion 119.07(3)(i), Florida Statutes. I further certify that the information ame legal effect as if made under oath; that I am an officer or director Florida Statutes; and that my name appears in Block 11 or Block 12 if	

4-26-2001

CR2E034 (10/00)

232

Att: Annual Report Department

Ref: S17TPA, CORP./P96000062290

As per our conversation, I'm sending you \$308.75 for the year 2001 and 2002 without the penalty fee. As I explained to you I had many problems obtaining the Tax Id number and also many health problems that enable me to keep myself on top of this situation. I want to thank your office for understanding my situation and especially for waiving the fee. I can guarantee you that if I had the money and if I would not have gone through this I would have send you the late fee. I can say that thank god my health situation has gotten better and I was able to speak with the Tax Id office and obtained the number. Thanking you in advanced,

Alain M. Bonvecchio (President Of S17TPA, CORP.)

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE PHILADELPHIA PA 19255

33

DATE OF THIS NOTICE: 08-06-2002 NUMBER OF THIS NOTICE: CP 575 A EMPLOYER IDENTIFICATION NUMBER: 47-0879696 FORM: SS-4 0533421655 B

FOR ASSISTANCE CALL US AT: 1-800-829-1040

S17TPA CORP 5101 N W 79TH AVE MIAMI FL 33166

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 47-0879696. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

## Form 1120

## 03/15/2003

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.

If you're required to deposit for employment taxes (Forms 941, 943, 940, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), we will send an initial supply of Federal Tax Deposit (FTD) coupon books within six weeks. You can use the enclosed coupons if you need to make a deposit before you receive your supply.