# STARTING & OPERATING A BUSINESS IN FLORIDA

Start-Up Checklist



Office Of Small Business Assistance Of Palm Beach County

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#### **Helpful Websites**

#### Links

www.business.gov.startup
www.floridasmallbusiness.com
www.dos.state.fl.us/doc/cor\_form.html
www.dos.state.fl.us/doc/feecor
www.sun6.dms.state.fl.us/dor/forms
www.sunbiz.org

#### To Find Info About

(Gateway to Federal Resources)
(Start-Up Your Business Info)
(Click on the "Business" Tab)
(Fee Schedules)
(Dept. of Revenue)
(Forms, Scheduling Fees, Starting A
Business, etc.)

#### IMPORTANT QUESTIONS TO ASK YOURSELF ABOUT STARTING A BUSINESS

#### Are you able to answer "yes" to at least six of the following questions?

1.	Many business owners work twice as many hours in their own business as they did w	hen they	worked for someone else.
	Are you willing to invest 50, 60 or 70 hours a week to run a business?	□ Yes	□ No
2.	In your own business, there's no one to tell you what to do and when to do it.  Are you self-motivated?	□ Yes	□ No
3.	Successful business owners must manage money, hire and fire workers, comply with product or service.	regulatio	ns and produce a top-notc
	Do you have business skills or experience? Leadership experience?	□ Yes	□ No
4.	Entrepreneurs must do more than talk about their commitment to the business, they i		
	Are you willing to risk your savings on the venture?	□ Yes	□ No
5.	Family squabbles and failed marriages are common when the business isn't a team e	effort.	
	Is your family supportive of the time and money you'll have to spend?	□ Yes	□ No
6.	Evaluate whether the demand is long-lasting or a fad.		
	Do you have a product or service that is in demand?	□ Yes	□ No
7.	Most small businesses are funded by friends and family, not bank loans.		
	If you will need outside financing, do you have a network of friends or business provide it?	associate  □ Yes	s who will □ No
	provide it.	100	-110
8.	Can you name five firms that sell your product or service locally or on the Internet? commerce has changed the nature of competition in many businesses.	Keep in i	mind that electronic
	Do you know what the competition is?	□ Yes	□ No
9.	It's important to know your niche, whether it's cheap prices or personal service, and	l then tars	get customers.
	Does your business have some advantage over existing firms?	□ Yes	□ No
	If you haven't been able to answer "yes" to at least six of th	re above	e questions.
	you may want to evaluate more carefully your po		

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as a small business owner.

#### Ten Steps to Starting Your Small Business

- 1. Write a Business Plan. Most businesses fail because they don't have a clearly spelled-out business plan. Don't make that mistake. Put together a detailed and accurate business plan. The more questions you can answer now, the fewer surprises you'll encounter down the road. A well-researched plan not only helps you define your goals, but it is also a document you can present to a loan officer or other potential loan source.
- 2. Raise your Capital. Once you've found the business of your dreams, you'll need to find a way to finance it. Crazy as it sounds, experts advise starting your business without a loan. The key is to begin small and use the resources you already have. The average cost to start a business from home ranges from \$50 to \$2,000. If you do need to borrow money, find out about local resources such as the local Small Business Administration office or local programs for small businesses.

Another source of financing is family or friends. If you do accept financing from another party even if it is from family or friends, spend the time (and money, if necessary) to draw up a contract stating all the particulars of the loan. Finally, if you must use a credit card to finance your business, put a limit on how much you charge and stick to it.

- 3. Name your Business. Your business name should tell the customer exactly what you do. For example, if your leaf-raking business is called "Leaves of Autumn," a person walking down the street wouldn't necessarily make the connection. But if it's called "We Rake So You Don't," a passerby in need of yard work will give you a call. If you don't want to use a fictitious name, simply use your full legal name in the title of your business. If your name is Alice Smith, call your umbrella business Alice Smith Umbrellas. However, if you name the business Umbrellas for U, you will have to register the name with the Secretary of State and the County Clerk's office, and will also have to place an announcement in the local newspaper.
- 4. Make it Legal. Whenever you start a small business, you will have to deal with legal issues. Don't think that you're too small for local authorities to bother with. Be sure to:
- Find out about your local zoning laws. Call the Palm Beach County Planning and Zoning Office at (561) 233-5003.
   Chances are it is legal to open a home business in your town, but it's better to make sure first.
- Find out what license(s) you need to do business. (561) 355-2272 (Palm Beach County Occupational License Office). Costs vary.
- Get a state sales tax certificate so you can start collecting and paying state sales taxes if you're selling goods. Get a resale tax certificate if you're going to be buying or selling wholesale goods. Get appropriate form(s) from the Internal Revenue Service at (800) 829-3676.

- 5. Set Your Pricing. Have a price list or contract available for your clients. This way, customers know what they are getting, how much they are going to pay, and when it will be ready. A book, "The Contract and Fee Setting Guide for Consultants and Professionals," by Howard L. Shenson provides some excellent guidelines.
- 6. Investigate Your Insurance Options. Like home insurance, business insurance protects the contents of your business against fire, theft and other losses. Contact your insurance agent or broker. It is prudent for any business to purchase a number of basic types of insurance. Some types of coverage are required by law, others simply make good business sense. Examples are: liability insurance; property insurance; business interruption insurance; home office insurance.
- 7. Set Up Your Office. You'll need to decide whether or not you need a small or large area. You should base this decision on your business plan and the service or product your business will offer on a daily basis.

When shopping for business equipment, ask yourself "Do I really need this?" Ask that at least five times, take a deep breath, and go home and think about it for a week. By then you will realize that you don't need all 25 colored pens - three will suffice.

- 8. Get Stationery and Business Cards. Business cards and personal letterhead are essential. If you have a computer, some sort of publishing software and a decent printer, you can easily make your own. Most office supply stores carry good quality paper and card stock. If you're not comfortable designing or producing your own letterhead or business cards, have it done professionally. This is one area you don't want to skimp on.
- 9. Get a Second Phone Line. You may want to consider installing a second phone line for your business. The advantages include the ability to track business call expenses and list the number in the Yellow Pages. If a second line is too expensive at first, there is another solution. The phone company can give you a business number that rings on your regular phone with a double ring that lets you know it's a business call.
- 10. Don't Forget the Details. Get yourself an organizer, and use it! Consider getting a post office box for your business address if you don't want clients coming to your house.

#### You have a lot to do! So get going!

Palm Beach County
Office of Small Business Assistance
50 S. Military Trail, Suite 209
West Palm Beach, Fl 33415

Phone: 561-616-6840 Fax: 561-616-6850

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#### **CHOOSING A LEGAL STRUCTURE**

To get a business up and running, you must first decide on its legal structure:

#### CORPORATION

A separate legal entity must be incorporated with the Florida Department of State, Division of Corporations.

- **Pro:** Vith a C-Corporation the corporation, rather than the individuals, pays taxes and assumes liabilities
  - ✓ C-Corporations pay Florida's 5.5% corporate income tax
  - ✓ S-Corporations allow up to 75 shareholders to share income and expenses and to report them on their individual income tax returns
- Con: 

  Annual filing fees are higher than for other corporate structures

#### LIMITED LIABILITY COMPANY

A hybrid form of business that combines the elements of partnerships and corporations. LLCs must file initially with the Florida Department of State, Division of Corporations.

- **Pro:** 
  May elect to be taxed as either a partnership or a corporation
- Con: ✓ Annual filing with State of Florida

#### PARTNERSHIP

Limited Partnerships must file initially with the Florida Department of State, Division of Corporations. An annual filing, called the Uniform Business Report, is required.

- **Pro:** ✓ Can be formed as easily as sole proprietorships
  - ✓ Allows two or more people to share liability and provide capital
  - ✓ Business income is reported on partners' individual tax returns
- Con: / A written partnership agreement is needed
  - ✓ Cannot be dissolved on a whim

#### SOLE PROPRIETORSHIP

- **Pro:** \( \square \) No state filings to set up and disband
  - ✓ Profits are taxed at the owner's individual federal income tax rate, with the amount reported on Schedule C or Schedule CZ
- Con: 
  Owners have unlimited personal liability for any debts or other obligations the business incurs. In Florida, at least for now, that liability is limited by the State's homestead rights laws, preventing creditors from seizing an owner's home.

#### Fictitious Name Registration - General Information

Registration under the <u>Fictitious Name Act</u> is for public notice only and gives rise to no presumption of the registrant's rights to own or use the name registered nor does it affect trademark, service mark, or corporate name rights previously acquired by others in the same or similar name. Registration under this section does not reserve a fictitious name against future use.

For the purpose of filing documents on-line, the typed name of the individual "signing" the document is sufficient under s.15.16, Florida Statutes. Electronic signatures have the same legal effect as original signatures. Typing in someone's name/signature without their permission constitutes forgery.

Refer to Chapter 15.16(6), Florida Statutes, for additional information regarding the advertisement of the intention to register a fictitious name.

The Division of Corporations will not deny a registration for a duplicate name. Every fictitious name application will be registered if statutory filing requirements are met. Applicants that are licensed under other sections of statute should insure that a proposed name is acceptable under the provisions of their respective regulating law prior to submission of an application under this part.

If a business fails to comply with this act, the business, its members, and those interested in participating in such business may not maintain any action, suit, or proceeding in any court of this state until this section is complied with. Any person who fails to comply with this act commits a misdemeanor of the second degree, punishable as provided in s.775.082 or s.775.083, Florida Statutes.

Effective January 1, 1991, the filing responsibility for fictitious name registration is with the Department of State, Division of Corporations.

A person may engage in business under a fictitious name by registering the name with the Division of Corporations by completing the "Application for Registration of Fictitious Name."

If a change of ownership occurs, the owner(s) of record must file a cancellation and re-registration within 30 days of the change.

Fictitious names are valid for 5 years and expire on December 31<sup>st</sup> of the fifth year.

Each Fictitious Name Registration must e renewed between July 1 and December 31 of the expiration year to maintain registration under this act. The Division of Corporations will mail to the last reported mailing address, at least 3 months prior to its expiration date, a statement of renewal. Please keep your current address on file with the Division of Corporations.

#### **Contact Information**

Any request for certificate of status or a certified copy of a Fictitious Name Registration, if other than on the initial registration, should be directed to the Division of Corporations, P. O. Box 6327, Tallahassee, Florida 32314

For information regarding fictitious names on file, you may search the Division's records online or call (850) 488-9000. Hearing/Voice Impaired may call (850) 245-6069 (TDD).

Mailing Address for RegistrationPhone NumberOn-Line RegistrationInternet AddressFictitious Name RegistrationQuestionswww.sunbiz.orgP. O. Box 1300850-488-9000850-245-6058

Tallahassee, Florida 32302-1300

#### **Fictitious Name Fees**

The non-refundable processing fees for on-line registration of fictitious names are as follows:

Registration of Fictitious Name.....\$50.00

Cancellation and Re-registration of Fictitious Name...\$50.00

Renewal of Fictitious Name Registration.....\$50.00

Certified Copy of Fictitious Name Registration ......\$30.00

Search of Records.....\$11.00

Certificate of Status of Fictitious Name Registration ..\$10.00

Photocopies......\$1.00 per page

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#### 865.09 Fictitious name registration.—

- (1) SHORT TITLE .-- This section may be cited as the "Fictitious Name Act."
- (2) **DEFINITIONS.--**As used in this section:
  - (a) "Fictitious name" means any name under which a person transacts business in this state, other than the person's legal name.
  - (b) "Business" means any enterprise or venture, in which a person sells, buys, exchanges, barters, deals, or represents the dealing in anything or article of value, or renders services for compensation.
  - (c) "Division" means the Division of Corporations of the Department of State.
- (3) **REGISTRATION.**--A person may not engage in business under a fictitious name unless the person first registers the name with the division by filing a sworn statement listing:
  - (a) The name to be registered.
  - (b) The mailing address of the business.
  - (c) The name and address of each owner and, if a corporation, its federal employer's identification number and Florida incorporation or registration number.
  - (d) Certification by the applicant that the intention to register such fictitious name has been advertised at least once in a newspaper as defined in chapter 50 in the county where the principal place of business of the applicant will be located.
  - (e) Any other information the division may deem necessary to adequately inform other governmental agencies and the public as to the persons so conducting business.

Such statement shall be accompanied by the applicable processing fees and any other taxes or penalties owed to the state.

- (4) CHANGE OF OWNERSHIP,--If the ownership of a business registered under this section changes, the owner of record with the division shall file a cancellation and re-registration that meets the requirements set forth in subsection (3) within 30 days after the occurrence of such change.
- (5) TERM.-A fictitious name registered under this section shall be valid for a period of 5 years and expires on December 31 of the 5th year,
- (6) RENEWAL.-
  - (a) Renewal of a fictitious name registration shall occur on or after January 1 and on or before December 31 of the expiration year. Upon timely filing of a renewal statement, the effectiveness of the name registration is continued for 5 years as provided in subsection (5).
  - (b) In the last year of the registration, the division shall mail to the last reported mailing address or to the address of any registered owner of a name a statement of renewal.
  - (c) If the owner of the name registration fails to file a renewal and pay the appropriate processing fees prior to December 31 of the year of expiration, the name registration expires. The division shall remove any expired or canceled name registration from its records and may purge such registrations. Failure to receive the statement of renewal required by paragraph (b) shall not constitute grounds for appeal of a registration's expiration or removal from the division's records.
- (7) EXEMPTIONS.--A business formed by an attorney actively licensed to practice law in this state, by a person actively licensed by the Department of Business and Professional Regulation or the Department of Health for the purpose of practicing his or her licensed profession, or by any corporation, partnership, or other commercial entity that is actively organized or registered with the Department of State is not required to register its name pursuant to this section, unless the name under which business is to be conducted differs from the name as licensed or registered.
- (8) EFFECT OF REGISTRATION.--Notwithstanding the provisions of any other law, registration under this section is for public notice only, and gives rise to no presumption of the registrant's rights to own or use the name registered, nor does it affect trademark, service mark, trade name, or corporate name rights previously acquired by others in the same or a similar name. Registration under this section does not reserve a fictitious name against future use.
- (9) PENALTIÉS .--
  - (a) If a business fails to comply with this section, the business, its members, and those interested in doing such business may not maintain any action, suit, or proceeding in any court of this state until this section is complied with. An action, suit, or proceeding may not be maintained in any court of this state by any successor or assignee of such business on any right, claim, or demand arising out of the transaction of business by such business in this state until this section has been complied with.
  - (b) The failure of a business to comply with this section does not impair the validity of any contract, deed, mortgage, security interest, lien, or act of such business and does not prevent such business from defending any action, suit, or proceeding in any court of this state. However, a party aggrieved by a non-complying business may be awarded reasonable attorney's fees and court costs necessitated by the non-complying business.
  - (c) Any person who fails to comply with this section commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.
- (10) POWERS OF DEPARTMENT.-The Department of State is granted the power reasonably necessary to enable it to administer this section efficiently, to perform the duties herein imposed upon it, and to adopt reasonable rules necessary to carry out its duties and functions under this section.
- (11) **FORMS.**--Registration, cancellation, and renewal shall be made on forms prescribed by the Department of State, which may include the uniform business report, pursuant to s. 606.06, as a means of satisfying the requirement of this <sup>1</sup>part.
- (12) PROCESSING FEES.--The Department of State shall charge and collect nonrefundable processing fees as follows:
  - (a) For registration of a fictitious name, \$50.
  - (b) For cancellation and re-registration of a fictitious name, \$50.
  - (c) For renewal of a fictitious name, \$50.
  - (d) For furnishing a certified copy of a fictitious name document, \$30.
  - (e) For furnishing a certificate of status, \$10.
- (13) **DEPOSIT OF FUNDS.**--All funds required to be paid to the Department of State pursuant to this section shall be collected and deposited into the General Revenue Fund.
- (14) **PROHIBITION.**--A fictitious name registered as provided in this section may not contain the words "Corporation" or "Incorporated," or the abbreviations "Corp." or "Inc.," unless the person or business for which the name is registered is incorporated or has obtained a certificate of authority to transact business in this state pursuant to chapter 607 or chapter 617.
- (15) LEGAL DESIGNATION OF ENTITY.--Notwithstanding any other provision of law to the contrary, a fictitious name registered as provided in this section for a corporation, limited liability company, limited liability partnership, or limited partnership is not required to contain the designation of the type of legal entity in which the person or business is organized, including the terms "corporation," "limited liability company," "limited liability partnership," "limited partnership," or any abbreviation or derivative thereof.

#### APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only. 1. Fictitlous Name to be Registered (see instructions if name includes "Corp" or "Inc") Mailing Address of Business State Zip Code 3. Florida County of principal place of business: (see instructions if more than one county) This space for office use only A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary): 1. Last Address Address City City State Zip Code Zip Code Section 2 B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary): Entity Name Entity Name Address Address City State Zip Code City Zíp Code Florida Registration Number Florida Registration Number FEI Number: \_\_\_\_ FEI Number: \_\_\_ ☐ Applied for ☐ Not Applicable ☐ Applied for ☐ Not Applicable I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if Section 3 made under oath. (At Least One Signature Required) Signature of Owner Signature of Owner Phone Number: Phone Number: FOR CANCELLATION COMPLETE SECTION 4 ONLY: FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4: I (we) the undersigned, hereby cancel the fictitious name \_\_\_\_\_ \_\_\_\_\_, which was registered on \_\_\_\_\_ and was assigned registration number \_\_\_\_\_

Mark the applicable boxes

Date

Signature of Owner

☐ Certificate of Status — \$10

Signature of Owner

☐ Certified Copy — \$30

NON-REFUNDABLE PROCESSING FEE: \$50

Date

#### Instructions for Completing Application for Registration of Fictitious Name

#### Section 1:

**Line 1:** Enter the name as you wish it to be registered. A fictitious name may <u>not</u> contain the words "Corporation" or "Incorporated," or the abbreviations "Corp." or "Inc.," unless the person or business for which the name is registered is incorporated or has obtained a certificate of authority to transact business in this state pursuant to chapter 607 or chapter 617 Florida Statutes. Corporations are not required to file under their exact corporate name.

Line 2: Enter the mailing address of the business. This address does not have to be the principal place of business and can be directed to anyone's attention. DO NOT USE AN ADDRESS THAT IS NOT YET OCCUPIED. ALL FUTURE MAILINGS AND ANY CERTIFICATION REQUESTED ON THIS REGISTRATION FORM WILL BE SENT TO THE ADDRESS IN SECTION 1. An address may be changed at any future date with no charge by simply writing the Division.

**Line 3:** Enter the name of the county in Florida where the principal place of business of the fictitious name is located. If there is more than one county, list all applicable counties or state "multiple".

#### Section 2:

Part A: Complete if the owner(s) of the fictitious name are individuals. The individual's name and address must be provided.

**Part B:** Complete if the owner(s) are not individuals. Examples are a corporation, limited partnership, joint venture, general partnership, trusts, fictitious name, etc. Provide the name of the owner, their address, their registration number as registered with the Division of Corporations, and the Federal Employer Identification (FEI) number. An FEI number must be provided or the appropriate box must be checked.

Owners listed in Part B must be registered with the Division of Corporations or provide documentation as to why they are not required to register. Examples would be Federally Chartered Corporations, or Legislatively created entities.

Additional owners may be listed on an attached page as long as all of the information requested in Part A or Part B is provided.

#### Section 3:

Only one signature is required. It is preferred that a daytime phone number be provided in order to contact the applicant if there are any questions about the application. Since the Department indexes fictitious names on a central database available on the internet, it is no longer required to advertise the intention to register a fictitious name.

#### Section 4:

**TO CANCEL A REGISTRATION ON FILE:** Provide fictitious name, date filed, and registration number of the fictitious name to be cancelled.

**TO CHANGE OWNERSHIP OF A REGISTRATION:** Complete section 4 to cancel the original registration. Complete sections 1 through 3 to re-register the fictitious name listing the new owner(s). An owner's signature is required in both sections 3 and 4.

**TO CHANGE THE NAME OF A REGISTRATION:** Complete section 4 to cancel the original registration. Complete sections 1 through 3 to re-register the new fictitious name. An owner's signature is required in both sections 3 and 4.

An acknowledgement letter will be mailed once the fictitious name registration has been filed.

If you wish to receive a certificate of status and/or certified copy at the time of filing of this registration, check the appropriate box at the bottom of the form. PLEASE NOTE: Acknowledgments/certificates will be sent to the address in Section 1. If a certificate of status is requested, an additional \$10 is due. If a certified copy is requested, an additional \$30 is due.

The registration and reregistration will be in effect until December 31 of the fifth year.

Send completed application with appropriate fees in the enclosed envelope to:

Fictitious Name Registration

PO Box 1300

Tallahassee, FL 32302-1300

Internet Address: http://www.sunbiz.org

The fee for registering a fictitious name is \$50. Please make a separate check for each filing payable to the Department of State. Application must be typed or printed in ink and legible.

#### **BUSINESS TAX RECEIPT**

By act of the Florida Legislature Local Occupational Licenses are now called Local Business Tax Receipts.

The Tax Collector is contracted by the Board of County Commissioners to collect the Local Business Tax. The tax is collected for the privilege of operating a business anywhere in the county, including municipalities. Anyone providing merchandise or services to the public, even a one-person company or home-based business must pay the Local Business Tax.

#### Important Information about Local Business Tax:

- 97,000 Palm Beach County Local Business Tax receipts were processed in 2007.
- The Local Business Tax is due September 30 and can be paid on or after July 1. On October 1, unpaid Local Business Tax is delinquent and subject to penalties each month thereafter.
- The Local Business Tax is prorated April 1, at which time half-year fees apply.
- Businesses must display Palm Beach County Business Tax Receipt viewable to customers.
- Businesses may also be subject to municipal and county laws, zoning codes and state regulations.
- Change of address, ownership, or name must be reported to the Tax Collector's Office and requires a new application.
- Public access to the official record of new Business Listings is available on this website and in our offices. Daily reports of new businesses are available by subscription on hard copy, diskette, CD or by internet download.

For additional information regarding Palm Beach County Business Tax Receipts, please visit the Tax Collector on the internet at <a href="http://www.pbcgov.com/tax/services">http://www.pbcgov.com/tax/services</a> business.shtml or call 561-355-2272.

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#### INSTRUCTIONS FOR OBTAINING A BUSINESS TAX RECEIPT

# CHANGE OF BUSINESS LOCATION REQUIRES ZONING APPROVAL & A NEW APPLICATION FORM COMPLETED

Please note: To determine whether your business is located within a municipality (city), contact the municipality nearest your business location.

- 1. If your business is located inside municipal (city) limits, you must submit the application to the municipality in person for their approval.
- 2. If your business is located in the unincorporated area of Palm Beach County (outside the limits of a municipality), you must take in-person a legal description of the property to: Planning, Building and Zoning Department, 100 Australian Avenue, West Palm Beach (233-5200) or 2976 State Road #15, Belle Glade (966-1650). Certain home based businesses may be exempt from this procedure. Further information may be obtained at any branch office.
- 3. Mail completed application with your check or money order to:

Tax Collector, Palm Beach County
P.O. Box 3715
West Palm Beach, Florida 33402-3715

#### SPECIAL REQUIREMENTS FOR CERTAIN OCCUPATIONS

- A. If your profession or occupation is certified by the Department of Business and Professional Regulation (850-488-7587) or Department of Health (850-488-0595), you must attach a copy of your certification, registration, or license to this application.
- B. Banks, mortgage brokers, finance companies, and stockbrokers must be registered with the State Comptroller (850-488-0286) or the Federal Home Bank of Atlanta (404-888-8000) or Comptroller of Currency (404-659-8855). Attach a copy of state/federal/national license showing proper business location to this application.
- C. Restaurateurs and mobile food unit operators must contact the Division of Hotel & Restaurants (954-958-5520). You must attach a copy of an approved inspection report to this application or obtain an authorized signature on the face of this application.
- D. Child care must have the approval of the Palm Beach County Health Department (561-355-3018). You must attach a copy of the license to this application or obtain an authorized signature on the face of this application.
- E. Food outlets, auto repair, travel agencies, telemarketers, health and dance (ballroom) studios must submit a permit, registration or exemption from State of Florida, Department of Agriculture & Consumer Services (1-800-435-7352).
- F. Certified contractors must attach a copy of State of Florida and/or Palm Beach County Certification. Call 233-5525 for certification information. County license is required, county-wide municipal license is optional. You may submit a single check for both licenses.

#### LICENSES MAY BE OBTAINED IN PERSON AT ANY OF THESE BRANCH OFFICES

Actac Building 3551 South Military Trail Lake Worth, Fl 33463

Glades Office Building 2976 State Road #15 Belle Glade, Fl 33430 Governmental Center 301 North Olive Avenue West Palm Beach, FI 33401

Southeast Courthouse Complex 501 South Congress Avenue Delray Beach, Fl 33445 Northeast Court House Complex 3188 PGA Blvd. Palm Beach Gardens, Fl 33410

Mid-Western Communities Service Center 200 Civic Center Way Royal Palm Beach, Fl 33411

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#### Palm Beach County Zoning Division Home Business Tax Receipt Affidavit ULDC Section ART 4.B.1.A.70

#### 70. Home Business

A business, profession, occupation, trade, artisan, or handcraft conducted in a dwelling unit for commercial gain by a resident of the unit. A home business shall not include those businesses, which are required by State of Florida agencies to be open to the public, such as gun dealers.

#### a. Incidental Nature

Shall be clearly incidental and subordinate to the residential use of the dwelling property and shall be confined to no more than ten percent of the total floor area of the dwelling.

#### b. Location

With the exception of outdoor instructional services, a home business shall be conducted within the principal dwelling or off-site, and shall not be conducted within any accessory building or structure or within any open porch or carport that is attached to and part of the principal structure. Instructional services, which by their nature must be conducted outside of the principal structure, such as swimming lessons, shall be located in a rear or side yard.

#### c. No Change to Character of Dwelling

The residential character of the dwelling in terms of exterior appearance and interior space shall not be altered or changed to accommodate a home business.

#### d. Employees

Shall be conducted by members of the immediate family residing in the dwelling unit only. A maximum of one person who is not a member of the immediate family may assist in the operation of the home business at the residence.

#### e, Home Business

Shall be operated pursuant to a valid Business Tax Receipt for the use conducted by the resident of the dwelling. More than one home business may be permitted on a residential lot.

#### f. Advertising

No external evidence or sign shall advertise, display, or otherwise indicate the presence of the home business, nor shall the street address of the home business be advertised through signs, billboards, television, radio, or newspapers. Advertising on vehicles shall be limited to the minimum necessary to meet requirements mandated by F.S. Chapter 489 or Chapter 67-1876 of the PBC Contractor's Certification Division Manual.

#### g. On-Premise Sales

A home business shall not involve the sale of any stock, trade, supplies, products, or services on the premises, except for instructional services.

#### h. Instructional Services

Instructional services shall meet the following additional regulations:

#### 1) Home Instruction, Inside

Teaching which takes place inside the dwelling unit of the instructor. Typical instruction includes music lessons and academic tutoring.

#### 2) Home Instruction, Outside

Teaching which takes place outside the dwelling unit, on the property of the instructor. This type of instruction is limited to subject matter which necessitates outside instruction. Typical instruction includes tennis, swimming lessons, dog training and equestrian lessons.

#### 3) Hours of Operation

Instruction shall occur only between the hours of 9:00 a.m. and 8:00 p.m. daily.

#### 4) Insurance

Proof of liability insurance in the amount of at least \$300,000 covering the instructional service shall be submitted prior to the issuance of a Special Permit.

#### 5) Number of Students

A maximum of three students at a time shall be permitted to receive instruction during a lesson.

#### 6) Parking

No more than two vehicles associated with the lessons shall be permitted to be parked at the instructor's home at any time.

#### 7) Resident

The instruction must be conducted by a resident of the dwelling where the lessons are provided. Only one instructor shall be permitted to provide instruction. The Business Tax Receipt shall be issued to the instructor.

#### i. Outside Storage

No equipment or materials used in the home business shall be stored or displayed outside of the dwelling, including driveways.

#### i. Nuisances

No home business shall involve the use of any mechanical, electrical or other equipment, materials or items which produce noise, electrical or magnetic interference, vibration, heat, glare, smoke, dust, odor or other nuisance outside the residential building. There shall be no storage of hazardous or noxious materials on the site of the home business. There shall be no noise of an objectionable nature from the home business audible at adjoining property lines.

#### k. Violations or Hazard

If any of the above requirements are violated, or if the use, or any part thereof, is determined by the Zoning Director to create a health or safety hazard, then the Business Tax Receipt may be revoked.

#### I. Vehicles

One business related vehicle per dwelling unit not over one ton rated capacity may be parked at the home, provided the vehicle is registered to a resident of the dwelling & meets the resident parking code, commercial vehicles are prohibited.

#### **AFFIDAVIT OF COMPLIANCE**

I have read the above regulations for home Business Tax Receipts. I am aware of my responsibilities and liabilities for the use and business on the property. I do hereby covenant and agree to abide by each of the aforesaid stipulations. I further understand that any violation of the stipulations may result in possible code enforcement action and/or revocation of Business Tax Receipt.

Applicant Name:	
Business Name:	
Business Address:	
Occupation:	
Signature of Applicant:	Date

# TAX COLLECTOR, PALM BEACH COUNTY APPLICATION FOR PALM BEACH COUNTY BUSINESS TAX RECEIPT

(COUNTY ORDINANCE 72-1)

Account #

FICTITIOUS NAME REGISTRATIO	ON MUST .	ACCOMPANY TI	HIS APPLICATION
BUSINESS INFORMATION:		Start of Business D	Date
Business Name			
Business Address			
City/StateZip	_	Mailing Address (I	f Different)
Business Phone	<del></del>	City/State	Zip
*Federal Employer I.D.#	- OR -	*Social Security #_	
Nature of Business			
Maximum Number of: Employees Mac	chines	Rooms	Restaurant Seating
Were you issued a Notice of Non-Compliance?	Yes	No	
I certify that the above information is true result in penalties as provided by law.	and correct	, and I understand t	hat any false statements could
Signature	Tit	e	
*** See reverse side			
UNINCORPORATED/COUNTY ZONING AI Legal Description of property (Property Apprai		6)	
Section Township Range	Zoni	ng	
This business is presently served by:	Zoni Onsite Well		nk
This business is presently served by:	Onsite Well	Septic Tar 2) Fire Mars 3) Health De 4) Hotel & F 5) Prior Use	hall epartment Restaurant of bay\bldg,
This business is presently served by: Public Water Public Sewer (  1) Planning Building and Zoning A. Zoning (U No.) B. Compliance C. Building D. Zoning E. Other	Onsite Well	Septic Tar 2) Fire Mars 3) Health De 4) Hotel & F 5) Prior Use	hall epartment Restaurant of bay\bldg,
This business is presently served by: Public Water Public Sewer C  1) Planning Building and Zoning A. Zoning (U No.) B. Compliance C. Building D. Zoning E. Other  *** Signature a	Onsite Well	2) Fire Mars 3) Health De 4) Hotel & F 5) Prior Use SIC Code esignates Approva	hall epartment Restaurant of bay\bldg   ***
This business is presently served by: Public Water Public Sewer C  1) Planning Building and Zoning A. Zoning (U No.) B. Compliance C. Building D. Zoning E. Other	Onsite Well	2) Fire Mars 3) Health De 4) Hotel & F 5) Prior Use SIC Code esignates Approva	hall epartment Restaurant of bay\bldg,

\*Per FS 205.0535(5)

PBCTC Form 65 (01/08)

#### How to Test Market Your Entrepreneurial Idea

Have a great idea for a business and/or product? The National Foundation for Women Business Owners says the primary reason women are launching new businesses is that they are inspired by an entrepreneurial idea. However, before putting a major investment of your time and money into your venture, experts suggest you conduct some test marketing to decide whether or not a new product/service is worthy of pursuit. How can you prepare for test marketing?

Follow your business plan: A good one will have a marketing plan to reveal those customers most likely to buy your product/service, on whom you can concentrate your test-marketing efforts.

#### Ask yourself the following:

- 1. What are the reasons potential customers would want to purchase my product/service?
- 2. What does my product/service have that my competitors' don't?
- 3. Does my idea follow a short-term trend or one with a potential long-term future?
- 4. Is my product/service cost-effective and likely to product profits needed to sustain a thriving business?

#### What are some affordable test marketing methods?

- 1. If you have a product, give away samples to friends and family members, or at flea markets and trade shows. Ask for immediate and honest feedback.
- 2. If you have a service idea, perform your service for free for family, friends or non-profit organizations to see if you are good enough at it to make money.
- 3. Run classified ads, give out flyers or send out a direct mailing with a [postage paid] survey card to see the response you receive in terms of orders and/or requests for your services.
- 4. Send out a quarterly promotional newsletter with a questionnaire asking customers to evaluate not only new products and/or services, but your existing ones.
- 5. Send press releases to print, radio and television media announcing the release of your new product and/or service in conjunction with a contest or giveaway promotion.
- 6. Contact a high school or business college class to see if they will conduct valuable consumer research for you gratis, as a class project.
- 7. Team up with an established woman business owner to offer your product and/or service as an additional sideline to her venture.
- 8. Make telephone calls to, and conduct polls among, people who have indicated they would like more information about your business.

#### Evaluating your test marketing results:

- 1. How many people liked your idea and/or product and said they would definitely buy or use it?
- 2. Did your efforts result in new customers and/or revenues?
- 3. Did you discover a new market area?
- 4. If you had a poor response in your community, is there a nearby location better suited to your idea?

Conducting thorough test marketing will help guide you in making strategic business decisions, and make it more likely you'll become a successful entrepreneur.

Revised: 6/27/08

o matter what the business or its degree of complexity, the business person needs a comprehensive plan to translate his or her idea into a working operation. A business plan should be prepared to thoroughly plan a new business, present to a lending institution for financing, promote an existing business in seeking additional investors for expansion, and assist management in determining areas of strength and weakness in making longrange business plans.

An outline of a model business plan follows. Possibly no plan would include all the items as listed; however, the more complete the plan, the more effective it is as a financial or management tool.

# OUTLINE OF A MODEL BUSINESS PLAN

#### 1. Cover letter or summary statement

- a. Business description: name, location, product, years in business (if any).
- b. Business goals: short range (profit) and long range (expansion and growth).
- Loan requested: total cost of new venture or expansion, percent of total needed to borrow, terms and interest rate desired.
- d. Return on investment: net effective cash flow return per year over total investment.
- e. Equity structure: total owner-ship (equity investment) divided by total capitalization (total assets). A one-to-one ratio or a 50% equity is desirable.

#### 2. Uses and sources of funds

- a. Use or costs: land, building, equipment and current operating costs for first 2-6 months.
- b. Sources of funding: projected amount of total capital to be received from local bank. SBA or venture capitalists, investment of cash and assets of major investors and amounts invested by limited partners or stock investors.

#### 3. Personal information

- a. Personal résumés of all major investors or owners.
- b. Personal average monthly budget of all owners: source of personal income and typical monthly expenses.)
- c. Current (within 60 days) balance sheet for each owner: current value of all personal assets and personal debts.

#### PREPARING A BUSINESS PLAN

d. Copies of federal income tax returns (Form 1040) for the past three years.

#### 4. Management team

- a. Copy of legal form of ownership (articles of partnership, corporation charter, etc.).
- Brief résumés and job description of key personnel: background, skills, duties.
- c. Organizational chart of the business.

#### 5. Legal documents

- a. Lease agreements or purchase agreement..
- b. Franchise agreements, if any.
- c. Plans, specifications, cost breakdowns (if a building project).
- d. Business life insurance policy summary.
- e. Buy-sell agreements (insurance).
- f. Copies of licenses, zoning changes, fictitious trade name.
- g. Current credit report on owner from local credit bureau.

#### Market analysis - total projected sales for the next three years based on:

- a. Customers: Group by common identifiable characteristics. Who are they and where are they? Are they influenced by price, quality, personalities, service?
- Market size: State size of total market in both units and dollars; state portion of region and local market for this business.
- c. Competition: Assess strengths and weak-nesses of competitive products and services; describe how new business will have an advantage over competition in meeting special local needs.
- d. Future trends: Whether ascending, descending or static demands, and degree of change.

#### 7. Product or service

- a. Give physical description of product and service and how it is different from competition.
- b. A brief development history of product, including patents and copyrights.
- c. List vendor and source suppliers.

#### 8. Physical plant

- a. Map of area and site location.
- b. Building layout showing product or customer flow.

# Manufacturing process (if applicable)

- a. Raw materials, component parts, goods in process.
- b. Methods used in process.

#### 10. Marketing strategy

- a. Describe general marketing philosophy.
- b. State product features emphasized: quality, service warranty, etc.
- c. State method of prospecting for customers.
- d. Pricing and credit policies: relationship of turnover and margin.
- e. Distribution policies: direct, wholesale or mail; sales commission structure.
- f. Promotion methods to be used: approaches, media, logo or trademark.

#### 11. Financial feasibility

- a. A brief, 5-year financial history, if existing business.
- b. Financial pro forma statement:
  - Cash flow statement; first year by months, and annual for next two years.
  - Income statement for each of the first three years,
  - Balance sheet: for opening day and end of the first and second years.
  - Key business ratios: opening day and end of first year.
- c. Break-even chart.
- d. Anticipated major capital investments within first three years.
- e. A capitalization statement of worth of business based on net income rate of return.

### You've Got a Lot to Do! So Get Going!!

Palm Beach County
Office of Small Business
Assistance
50 S. Military Trail
Suite 209
West Palm Beach, FL
33415

Phone: 561-616-6840 Fax: 561-616-6850

Revised: 6/30/08

# **Business Plan Outline Form**

1.	Cov	ver
2.		le Page
3.		ecutive Summary
	a.	What is the purpose of this plan?
	b.	What business structure have you chosen (i.e., sole proprietorship, partnership, corporation, S-Corporation)?
	c.	Who are the principals and what are their proportions of ownership?
	d.	Why will the business be successful?
4.	For	r a financing proposal
	a.	Who is requesting the funds and how much is needed?
	b.	What will the money be used for?
	c.	How will the funds be repaid?
	d.	What collateral will be offered to secure the loan?
	e.	Why does the loan or an investment make sense?
5.	Des	scription of the Business
٥,	a.	What business are you in?
	٠.,	
	b.	What are the specific goals?
	o.	What are the specific Board:
	c.	What market will you serve? What is the total market and what is your expected share?
	d.	How can you serve the market better than your competition?
	e.	Present status of business (start-up, expansion of on-going concern, takeover of existing business)
	f.	If you will be doing any contract work, what are the terms? Reference any firm contract and include it as a supporting document.
	g.	Do you have letters of intent from prospective suppliers?

6.	For	An Existing Business
	a.	What is the history of the business?
	b.	Why does the owner wish to seel at this time?
	C.	If the business is going downhill, why? How can you turn it around?
	d.	How will <i>your</i> management make the business more profitable?
	۵	What changes do you plan to make in the business?
	e.	what changes do you plan to make in the outsiness:
	f.	What is the purchase price formula? How much are they asking for the business?
7.	Bus	siness Location
	a.	What is your business address and why did you choose that location?
	b.	Will the building be leased or owned?
	U,	Will the building be leased of owned.
	c.	Describe the appearance of the building:
	d.	Describe the neighborhood (i.e., stable, changing improving, deteriorating, etc.)
	u,	Describe the neighborhood (i.e., stable, changing improving, decorotating, etc.)
	e,	What other kinds of businesses are in the neighborhood?
	f.	How much can your business expand before you will be forced to add on to the present building?
8.	Lic	enses and Permits
	a.	Is your business name registered with the Secretary of State?
	b.	How can local zoning regulations affect you?
	c.	What other licenses or permits will you be required to obtain?
9.	Ma	nnagement
	a.	What is your business and management experience?
	b.	What education have you had which contributes to your managerial abilities?
	c.	Are you physically suited to the job?

	d.	Do you have operational and/or managerial in this type of business?
	e.	Describe your organizational structure (who will do what in your business). Include an organizational chart if necessary.
	f.	Listed proposed salaries and wages:
	g,	What other management resources will be available? (accountant, lawyer, etc.)
10.	Per	sonnel
- • •	a.	What are your anticipated personnel needs?
	b.	What is your business and management experience?
	c.	Are you physically suited to the job?
	d.	Do you have operational and/or managerial experience in this type of business?
	e.	Describe your organizational structure (who will do what in your business). Include an organizational chart if necessary.
	f.	List proposed salaries and wages:
	g.	What other management resources will be available? (Accountant, Lawyer, etc.)
11.	Ins	urance  Describe your potential business risks. What insurance coverage will you purchase to protect yourself?
12.	Ma	rketing Strategy
13.	Pri	cing Strategy
14.	Pro	omotional Strategy

15.	Cus	stomer Service
16.		Market
	a.	Explain, in general terms, who needs your product or service and how you plan to reach them.
	b.	Who exactly is your market?
	c.	What is the present size and growth potential of the market?
-	d.	What percentage of the market will you have now and in the future?
	e.	How will you attract and keep your segment of the market?
	f.	What features or services will you offer that will justify the price?
17.	Cor	npetition
		Briefly describe your competition and tell how their operations are similar and dissimilar to yours. What is your
		unique selling proposition and how will you use it to control your share?
	b.	Identify your three major competitors.
	c.	Compare your business to the competition
	d.	List the changes that will improve your competitive position.
18.	Fin	ancial Data
	a.	Source and application of funds statement.
	b.	Capital equipment list.
	c.	Current balance sheet and operating statement .
	d.	Break-even analysis.
	e.	Profit and Loss.
	f.	Cash flow projections

	g.	Projected balance sheet.
	h.	Pricing breakdown
	i.	Personal financial statement for all principals.
19.		an Existing Business
	a.	Profit and Loss statements
	b.	Balance sheet and/or tax returns for past three years.
20.	Sup	pporting Documents Personal résumé for all principals
	b.	Letters of Reference
	c.	Letters of Intent from prospective suppliers or customers
	d.	Copies of all leases, contracts or agreements, deeds or other legal documents
	e.	Identify any other information that might help your cause or answer potential questions

# STARTING & OPERATING A SMALL BUSINESS IN FLORIDA CHECKLIST

#### **Worksheet 1 - Self-Evaluation Checklist for Going Into Business**

Under each question, check the answer that says what you feel or comes closest to it. Be honest with yourself.

1.	Arc	e you a self-starter?
	0	I do things on my own. Nobody has to tell me to get going.
		If someone gets me started, I keep going all right.
		Easy does it. I don't put myself out until I have to.
2.	Но	w do you feel about other people?
		I like people. I can get along with just about anybody.
		I have plenty of friends; I don't need anyone else.
	0	Most people irritate me.
3.	Ca	n you lead others?
		I can get most people to go along when I start something.
		I can give the orders if someone tells me what we should do.
		I let someone else get things moving; then I go along if I feel like it.
4.	Ca	n you take responsibility?
		I like to take charge of things and see them through.
		I will take over if I have to, but I would rather let someone else be responsible.
		There are always some eager beavers around wanting to show how smart they are. I say let them take the responsibility.
5.	Но	w good an organizer are you?
		I like to have a plan before I start. I am usually the one to get things lined up when the group wants to do
		something.
		I do all right unless things get too confusing. Then I quit.
		Just when I am all set, something comes along and presents too many problems, so I just take things as they

come.

6.	Ho	w good a worker are you?
		I can keep going as long as I need to. I don't mind working hard for something I want.
		I will work hard for a while, but when I have had enough, that is it.
		I can't see that hard work gets me anywhere.
7.	Cai	n you stick with it?
		If I make up my mind to do something, I don't let anything stop me.
		I usually finish what I start if it goes well.
		If it doesn't go right, right away, I quit. Why beat my brains out?
8.	Ho	w good is your health?
		I never get run down. I have enough energy for most things I want to do.
		I run out of energy sooner than most of my friends seem to.
		Count the Checks You Made
		How many checks are beside the first answer to each question?  How many checks are beside the second answer to each question?  How many checks are beside the third answer to each question?
	-	If most of your checks are beside the first answers, you probably have what it takes to run a business.
	-	If not, you are likely to have more trouble than you can handle by yourself. You may want to find a partner who is strong on the points you are weak on.

→ If many checks are beside the third answer, not even a good partner will be able to shore you

# Worksheet 2 - Marketing Feasibility Study Checklist for Your Product or Services

#### **Your Product or Services**

1.	Briefly describe the nature of the product or services you will offer.
2.	Most products or services have a life cycle, beginning with very rapid growth in the introductory stage, which slows down in the maturity stage, flattens out in the saturation stage, and finally begins to shrink in the declining stage. Which stage of its market cycle do you believe your product or services is in?
	□ introductory □ maturity □ saturation □ declining
3.	If your product is in one of the earlier, faster-growing stages, what edge do you believe your product will have over similar products that may be introduced by new competitors who may come into the field?
4.	If you are entering at a fairly late stage of the product marketing cycle, why is it you believe that you can succeed in taking away others' market share with your product or services?
5.	How is your product or services different in terms of quality and price from what is already on the market?
6.	Is there a good reason to believe that your customers will recognize the difference?
7.	What is different about your marketing strategy or distribution strategy that will enable your product or services to succeed in a market where there is little, if any, growth?
No edi you ma	t everyone is a potential customer. Certain age groups, income levels, geographic areas, ethnic groups and acational levels will be more likely than others to be your customers. You need to focus on who will need are product and be most likely to buy it, and then decide where to locate your business or how to structure your rketing approach to reach those segments of the market that you are most interested in reaching. Spell our ow, as clearly as you can, who your customers are most likely to be.  The particular geographic area from which I will be able to draw most of my customers is:
1.	The particular geographic area from which I will be dole to draw most of my editornors is.

						the following geographic area or a	
3.	My plan or	strategy for re	eaching potential	customers in the a	bove	areas can be summarized as follow	vs:
4.			product or service	ces, in terms of der	nogra	phics, should be among the follow level and geographical location)	/ing
			·				
5.		income group scome levels:		product or services	shou	ld appeal primarily to people in the	е
		Under \$25,	000 a year house	hold income		\$50,000 - \$75,000 a year	
		·	35,000 a year			\$75,000 - \$100,000 a year	
		•	550,000 a year			More than \$100,000 a year	
6.				re in demand by ce be customers, if a		ocial, cultural and ethnic groups the:	han
7.			likely to be custo				
7.			·				
ır C Eve	Competition en though you	u may have d				ng your market segment, the job is	
ur C Eve unt	Competition en though you til you have c	u may have d onsidered you	one a great job in ur competition.	n pinpointing and s			
ur C Eve unt	Competition en though you til you have co	u may have do onsidered you rs in my mark	one a great job in ur competition. ket area are: (list t	n pinpointing and s	tudyin	g your market segment, the job is	n't
ur C Eve unt Ma	Competition en though you til you have co	u may have doonsidered yours	one a great job in ur competition.	n pinpointing and soften firms by name)	tudyin	ng your market segment, the job is	n't
Eve unt Ma 1. 2.	Competition en though you til you have co ain competito	u may have donsidered yours	one a great job in ur competition. ket area are: (list t	n pinpointing and soften firms by name) 5	tudyin	g your market segment, the job is	n't

Bas buy	sed on my market research of statistical data, such as Sales Marketing and Management magazine, the amount of ring power per business represented in my area is \$
1.	Five reasons why customers would buy from me rather than my competitors are:
	a
	b
	c
	d
	e
2.	To overcome these weaknesses, I will:
	·

# Worksheet 3 - Estimated Cash Inflow from Sales for Year \_\_\_\_\_

		Jan	Feb	Mar	Apr	4-Month Total
GROSS	SALES FOR THE MONTH					
Less:	Credit Sales Made					
Subtotal:	Cash Sales					
Plus:	Collections on Prior Credit Sales					
Less:	Bad Debts*					
Total: Net	Cash Flow From Monthly Sales					
		May	June	July	Aug	4-Month Total
GROSS	S SALES FOR THE MONTH					
Less:	Credit Sales Made	<u>.                                    </u>				
Subtotal:	Cash Sales					
Plus:	Collections on Prior Credit Sales					
Less:	Bad Debts*					
Total: Net	Cash Flow From Monthly Sales					
		Sept	Oct	Nov	Dec	4-Month Total
GROSS	S SALES FOR THE MONTH					
Less:	Credit Sales Made					
Subtotal:	Cash Sales				į	
Plus:	Collections on Prior Credit Sales					
Less:	Bad Debts*					
Total: Net	Cash Flow From Monthly Sales					

<sup>\*</sup> consider using some percentage, say 1% or 2% of credit sale collections, to estimate your uncollectible debt

# Worksheet 4 - Estimated Business Cash Outlay for Year \_\_\_\_\_

	Jan	Feb	Mar	Apr	May
MONTHLY EXPENSES					
Rent					
Salaries and Wages (Except Owner)					
Payroll Taxes					:
Advertising and Promotion					
Insurance					
Federal Estimated Income Tax					
State Estimated Income Tax					
Owner's Fica or Se Tax		,			
Telephone and Utilities					
Inventory Replacement Purchase					
Interest on Loans					
Maintenance					
Legal and Accounting Fees					
Office Supplies					·
Delivery Expense					
Miscellaneous					
ONE-TIME EXPENSES					
Fixtures and Equipment					
Decorating and Remodeling					
Initial Stock of Inventory					
Utility and Lease Deposits					
Licenses and Permits					
Other					
TOTAL EXPENSES FOR MONTH		(1.00) (1.00)			
Plus: Loan Principal Payment					
Less: Purchases on Credit					
Plus: Payment on Prior Credit					
NET MONTHLY CASH OUTLAY					

June	July	Aug	Sept	Oct	Nov	Dec	Annual Totals
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Worksheet 5 - Estimated Personal and Living Expenses for Year

worksheet 3 - Estimated 1 ersonar and Er	Jan	Feb	Mar	Apr	May
REGULAR PAYMENTS					
Rent or House Payment					
Property Taxes					
Condo Owner's Dues					
Car Payments					
Furniture and Appliance Payments					
Loan Payments					
Health Insurance					
Other Insurance					
HOUSEHOLD EXPENSES					
Food - Restaurants					
Food - At Home					
Telephone and Utilities					
Water					
PERSONAL EXPENSES					
Clothing and Laundry					
Medical, Dental and Drugs					
Education					
Dues and Subscriptions					
Gifts and Charity					
Gasoline and Auto					
Entertainment and Travel					
Miscellaneous Spending					
TOTAL PERSONAL EXPENSES (DRAW REQUIRED)					

June	July	Aug	Sept	Oct	Nov	Dec	Annual Totals
						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Annual Totals
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# Worksheet 6 - Summary of Estimated Cash Requirements for Year \_\_\_\_\_

	Jan	Feb	Mar	Apr	4-Month Total
Net Cash for Month from Sales - Worksheet 3					
Less: Net Monthly Cash Outlay - Worksheet 4					
Subtotal: Net Operating Cash Flow (Or Deficit)					
Less: Owner's Draw for Living and Personal Expenses - Worksheet 5					
Add: Money Borrowed					
Add (Or Subtract): Equity Capital Paid In (Or Withdrawn) from the Business	:				
Total: Net Cash Flow (Or Deficit) for Month					
Cumulative* Cash Flow (Or Deficit)					
	May	June	July	Aug	4-Month Total
Net Cash for Month from Sales - Worksheet 3					
Less: Net Monthly Cash Outlay - Worksheet 4					
Subtotal: Net Operating Cash Flow (Or Deficit)					
Less: Owner's Draw for Living and Personal Expenses - Worksheet 5					
Add: Money Borrowed					
Add (Or Subtract): Equity Capital Paid in (Or Withdrawn) from the Business					
Total: Net Cash Flow (Or Deficit) for Month					
Cumulative* Cash Flow (Or Deficit)				A SHAP	
	Sept	Oct	Nov	Dec	4-Month Total
Net Cash for Month from Sales - Worksheet 3					
Less: Net Monthly Cash Outlay - Worksheet 4					
Subtotal: Net Operating Cash Flow (Or Deficit)					
Less: Owner's Draw for Living and Personal Expenses - Worksheet 5					
Add: Money Borrowed					
Add (Or Subtract): Equity Capital Paid in (Or Withdrawn) from the Business					
Total: Net Cash Flow (Or Deficit) for Month	Mary San Services				
Cumulative* cash flow (Or Deficit)					

<sup>\*</sup> Add each month's net cash flow to the previous month's cumulative total

Annual Tot	tals: To get your total figures for the list below, add the three 4-mor	th totals together for each item.
Net Cash fo	or Month from Sales - Worksheet 3	
Less:	Net Monthly Cash Outlay - Worksheet 4	· 
Subtotal:	Net Operating Cash Flow (Or Deficit)	
Less:	Owner's Draw for Living and Personal Expenses - Worksheet 5	
Add:	Money Borrowed	
Add (Or Su	abtract): Equity Capital Paid in (Or Withdrawn) from the Business	
Annual Cu	mulative Cash Flow (Or Deficit):	

# **Employment Application**



#### Personal Data

Name				
First	Middle Initial	Last		
Address		Qir.	C4	71
	Apt.	City	State	Zip
Telephone Number	Ноте	Work		
D 3		77 07.77		
Education				□ Yes
High School	City/State		Graduat	
College/University	City/State		Graduate	□ Yes ed? □ No
Other (Please Specify	City/State		Certifica	nte? □ Yes
Cutof (Fieuso opeon)				□ No
Work Experience				
•		at a c		
List below all present and prev	ious employment starting with	the most recent.		
Company Name		Supervisor		E
Address				From (mo/yr)
				To (mo/yr)
Reason for Leaving		May we contact your en	nployer?	□ Yes □ No
Comments			<u>.                                    </u>	<del></del>
2 Clausens Nama		Cunowing		
	·			From (mo/yr)
Address		Phone #		To (mo/yr)
Reason for Leaving		May we contact your en	nployer?	□ Yes □ No
- · · ·				
3. Company Name		Supervisor		
		Phone #		From (mo/yr)
		<del> </del>		To (mo/yr)
Reason for Leaving		May we contact your en	nployer?	□ Yes □ No
Comments				
<del>-</del> -				From (mo/yr)
Address		Phone #		To (mo/yr)
Reason for Leaving		May we contact your e	mplover?	☐ Yes ☐ No
			inployer:	₩ 169 ₩ 140
Comments				

# **Worksheet 7 - Defining Your Company's Personnel Policies**

### A. Working Hours

	1.	Describe briefly the policy you will set for v Starting time:			
	2.	How much time will be allowed for lunch:			
		Quitting time:			
		Which days of the week will employees be			
	5.	If, like many companies these days, you will	adopt some kind of "flex tin		
В.	O	vertime			
	1.	Outline your policy on overtime work. (Che Points to consider:			Ū ,
		a			
		b			
		c			
C.	<b>C</b> c	Will you require employees to obtain permi  ompensation  Make a list of the job positions in the component of the property of	any other than your own, an	d the compensati	on level for each.
		Position Position	Hourly Wage	Salary	Total Monthly Pay
		•			
			<del></del>		<del></del>
				<del></del>	
	*7	o.			•
D.		Describe how much paid vacation employerservice.			
		Will vacation time and sick leave time off b			

1.			your policy for both paid and unpaid sick leave and family medical leave. (If you have more than 50 employees, ral Family and Medical Leave Act may apply to you.)
	a.	Sick	Leave:
	b.	Fam	ily/medical leave:
	c.	Birt	h or adoption of a child:
2.			of Absence
	a.	Wha	t will your policy be towards employees who request unpaid leaves of absence?
3.		Will	off With Pay you provide other time off with pay for such eventualities as funerals, jury duty and training? erals or family emergencies:
	b.	Jury	duty
	c.	Atte	nd work-related seminars and training sessions:
4.			tions and Evaluations ine your policy for evaluating employees' performance and determining when promotions will be made.
5.		_	Benefits
	a.	Con	sider which employee fringe benefits you will provide, and specify your policy for each:  Medical insurance:
		ii	Long-term disability insurance
		iii	Life insurance:
		iv	Dental insurance
		v	Medical expense reimbursement:
		vi	Child care benefits:
			Maternity benefits:

E. Family and Medical Leave Policy

	viii	Pension or profit sharing plans:
	ix	Paid holidays:
	x	Automobiles or allowances:
	хi	Expense accounts:
	xii	Educations assistance programs:
	xiii	Employee discounts on purchases:
	xiv	Stock options (if incorporated):
	xv	Incentive bonus plans:
	xvi	Other:
F. PI	1. If yo	Fees ou hire employees through a personnel agency or "headhunting" firm, will you pay the placement fee?
G. O	ther Con	npany Policies

# 10 QUESTIONS TO ANSWER BEFORE CHOOSING. A SMALL BUSINESS LENDER

# 1. Product Knowledge

Are the bankers well-versed in all products and services, not just the most common?

## 2. Attentiveness to the Small Business Owner's Needs

Does the banker have the best interest of your company at heart?

# 3. Responsiveness

Is your banker willing to adapt, adjust, and meet your unique needs in a timely manner?

# 4. Decisive Approach to Lending

Is your lender empowered to make loan decisions?

# 5. Branch Network

Will you have convenient, easy access to branch locations and ATMS?

# 6. Strength

Is the bank large enough to remain consistent, predictable and independent?

# 7. Soundness

Does the bank have a solid, proven track record in the market is serves?

# 8. Quality People

Are bank employees well-trained, bright, energetic and proactive in managing relationships?

## 9. Innovative

Is the bank beyond using a "one-size-fits-all" approach to small business lending?

# 10. Community Involvement

Does the bank demonstrate a long-term commitment to growth in the communities it serves?

# PUTTING TOGETHER A LOAN PACKAGE

## A. CAPACITY

Capacity is your ability to repay the loan from business cash flow or personal resources. The financial information you submit in your package will be evaluated to see if you generate sufficient income to cover business operating expenses, pay the owners a reasonable salary, pay the bank, and leave sufficient funds for future operating needs. Banks typically use historic earnings to gauge capacity, so having complete financial information is important. Be prepared to provide both financial information on the business and business principals.

#### B. CAPITAL

Capital is the money you invest in your business, better known as equity. Lack of capital is the largest reason for business failures. Businesses must be prepared to contribute capital at the start of business and throughout the life of the business. Strong company earnings will help generate capital through retained earnings; however, business owners must be prepared to contribute personal assets when company capital is inadequate. Banks typically require a 20 percent investment in the business by the owners for all financing requests. Always provide your bank with information regarding the capital position of the company and a personal financial statement listing the assets of the business principal.

#### C. COLLATERAL

The collateral for a loan is typically the assets pledged to the bank as a secondary source of repayment. Some banks weigh collateral more heaving than others do, but almost all banks require collateral of some sort. Be prepared to tell your banker what your company has to offer and be prepared to pledge those assets. In case your business collateral is not sufficient to support the financing request, a pledge of personal assets by the principals may be necessary. Equity in real estate, marketable securities and certificates of deposit (commonly called CDs) are common personal assets pledged as collateral. Remember that you are asking the bank to take a risk on you, so you must be willing to take a risk by pledging personal assets.

### D. CONDITIONS

In addition to the financial information, résumés and disclosure of assets and liabilities, it is always helpful to include in your package information about your industry and market. Give the bank a history of your business, including factors that the banker will need to understand how you achieve your success. If you are in a high-risk industry, tell the banker what is different about your company. If it has seasonal sales, how do you balance the funds throughout the year? If you sell luxury items, what will you do if the economy takes a downturn and sales fall off? You need to anticipate your banker's questions and answer them in advance.

The important thing about putting your package together is to include all the information required by your bank (see Check List on next page) plus anything else you believe will help them understand your business and its ability to repay the loan. Always be up-front with the facts, and give an explanation for anything out of the ordinary. Being up-front and honest with your banker will go a long way toward building confidence in you and your request.

### E. MAKE SURE YOUR PACKAGE INCLUDES:

2 years of most recent business fiscal year-end financial statements
2 years of most recent business income tax returns with all schedules attached
Current interim business financial statements, if more than 6 months since your fiscal year end
Current personal financial statements from all business principals/owners within last 12 months
2 most recent years' personal tax returns from all principals/owners with all schedules attached

u	If funds are to purchase fixed assets, a copy of pro forma invoice or detailed written estimate
	Current statement of stock/bond accounts (when listed as business or personal assets)
	For line of credit requests, copy of current aging for accounts receivable and accounts payable
FOR R	EAL ESTATE SECURED LOANS, ALSO INCLUDE:
	For purchase transactions, a copy of the purchase contract and a warranty deed
	Copy of most recent property tax statement
	Copy of survey
	Copy of existing appraisal, if available
	Copy of leases and current rent roll
FOR B	USINESS CREDIT CARD REQUEST, ALSO INCLUDE:
	Guaranty agreement for commercial credit card (one for each owner/principal)
	Corporate borrowing resolution, partnership certificate of LLC certificate
	Articles of Incorporation of partnership agreement

# HELPFUL TELEPHONE NUMBERS & ADDRESSES

# The Division maintains three different mailing addresses as follows:

JUDGMENT LIEN DOCUMENTS	ALL OTHER DOCUMENTS	COURIER
Department of State Division of Corporations Judgment Lien Filings P.O. Box 6250 Tallahassee, FL 32314	Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314	Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

1.	All General Telephone Inquiries	(800) 755-5111
2.	Information and Records	
	Internet Assistance	(850) 245-6939
	Certification/Copy Request	(850) 245-6053
	Service of Process	(850) 245-6953
3.	Corporate Filings	
	Florida Profit/Non-Profit Articles	(850) 245-6052
	Corporate Amendments/Dissolutions/Withdrawals	(850) 245-6050
	Corporate Mergers/Registered Agent Changes	(850) 245-6050
	Foreign Corporation Qualification	(850) 245-6051
	Corporation Annual Reports	(850) 245-6056
	Reinstatements	(850) 245-6059
4.	Limited Liability Company (LLC) Filings	
	Florida LLC Articles	(850) 245-6051
	Foreign LLC Qualification	(850) 245-6051
	LLC Amendments/Mergers	(850) 245-6051
	LLC Reinstatements	(850) 245-6051
	LLC Annual Reports	(850) 245-6051
5.	Partnership Filings	
	General Partnership Filings	(850) 245-6051
	Limited Partnership Filings	(850) 245-6051
	Limited Liability Partnership Filings	(850) 245-6051
	LP and LLP Annual Reports	(850) 245-6051
6.	Fictitious Name Filings	
	Registrations/Renewals	(850) 245-6058
7.	Trade and Service Mark Filings	(850) 245-6051
8.	Lien Filings	
	Federal Tax Liens	(850) 245-6051
	Judgment Liens	(850) 656-7463

# FLORIDA DEPARTMENT OF STATE FEE SCHEDULES

我摆走一只大大开心,只要禁止,还没有几个事的的第三人称单数的发展,都是我们,此后这个对象的影響。

www.dos.state.fl.us/doc/feecorp.html

## CORPORATION FEES

#### PROFIT, NON-PROFIT, AND TRADEMARKS

Filing Fees
Registered Agent Designation
* Certified Copy (Optional) 8.75
TOTAL 78.75
Amendment of Any Record
Profit Annual Report (& Supplemental Fee) 150.00
Profit Annual Report (Received After May 1)
Amended Profit Annual Report
Articles of Correction
Non-Profit Annual Report
Certificate of Status 8.75
* Certified Copy 8.75
** Photocopies 10.00
Change of Registered Agent
Dissolution & Withdrawal
Foreign Name Registration 87.50
Foreign Name Renewal 87.50
Merger (Per Party)
Reinstatement (Profit) 600.00
Reinstatement (Non-Profit)
Resignation of Reg. Agent (Active Corporation) 87.50
(Inactive Corporation)
Revocation of Dissolution
Substitute Service of Process (Chapter 48, F.S.) 8.75
Trade & Service Marks (Per Class) 87.50
Trade & Service Mark Assignment 50.00
Trade & Service Mark Renewals (Per Class) 87.50

 Certified copies are \$8.75 for the first 8 pages.
 Each additional page is \$1.00 per page, not to exceed a maximum of \$52.50.

This fee is applied only to requests that are done in person. All mail-in requests are charged a flat \$8.75.

\*\* Photocopies are \$1.00 per page for requests that are brought in to our office.

All mail-in requests are charged a flat \$10.00.

# LIMITED LIABILITY COMPANY

Annual Report
Certificate of Status
Certified Copy of Record
New Florida/Foreign LLC
Filing Fee (Required)
Registered Agent Fee (Required)
Total Fee For New Florida/Foreign LLC 125.00
Change of Registered Agent
Articles of Correction
Certificate of Conversion (+ New LLC Fees)
Registered Agent Resignation (Active) 85.00
Registered Agent Resignation (Dissolved)
Reinstatement Fee
Any Other Amendment
Articles of Dissolution/Withdrawal
Articles of Revocation of Dissolution
Articles of Merger (Unless Other Fee Specified)

#### FICTITIOUS NAME

Registration of Fictitious Names \$	50.00
Cancellation and Reregistration of Fictitious Name	50.00
Renewal of Fictitious Name Registration	.50.00
Certified Copy of Fictitious Name Registration	.30.00
Certificate of Status of Fictitious Name Registration	10.00
Search of Records	11.00
Photocopies (Per Page)	1.00

#### JUDGMENT LIEN FEES

Judgment Lien Certificate	
Add For Each Additional Debtor	5.00
Add For Each Attached Page	5.00
Second Judgment Lien Certificate	. 20.00
Judgment Lien Amendment Statement	. 20.00
Judgment Lien Correction Statement	. 20.00
Certified Copy	. 10.00

All fees are non-refundable processing fees.

No refunds will be issued by the Division if the Judgment Lien document cannot be filed or processed.

# PARTNERSHIP FEES

#### LIMITED PARTNERSHIP

Filing Fees (minimum)		\$ 52.50
(maximum)		1750.00
Registered Agent Design	nation	35.00

The filing fee is based on the total amount contributed and anticipated to be contributed by the limited partners as shown in the affidavit at a rate of \$7 per \$1000.00.

The filing fee for an Application to Register a Foreign Limited
Partnership is based on the total amount contributed by the limited
partners allocated for the purpose of transacting business in the
state of Florida at a rate of \$7 per \$1000.)

Affidavit Decreasing Contributions
Affidavit Increasing Contributions, per \$1,000 on increase 7.00
(\$52.50 min \$1,750 max.)
Amendment
(other than specified)
Invested capital, and required supplemental corp. fee 88.75
Cancellation
Certificate of Status (Certificate of Fact) 8.75
Certified Copy, 15 pages or fewer
Each page thereafter
Change of Reg. Agent/Office
Reinstatement
\$500 for each year or part thereof the partnership was revoked
plus the delinquent annual report fees
Resignation of Registered Agent
Photocopies, per page
(Please call 850-245-6053 for page count)

# GENERAL PARTNERSHIP

Partnership Registration Statement\$ 50.00
Statement of Partnership Authority
Statement of Denial
Statement of Dissociation
Statement of Dissolution
Statement of Qualification FL or FOR LLP
Statement of Qualification FL LLLP
Limited Liability Partnership Annual Report 25.00
Statement of Merger for Each Party
Amendment to Statement or Registration
Cancellation of Statement or Registration
Certified Copy 52.50
Certificate of Status 8.75
Photocopies 10.00

# HELPFUL WEBSITE INFORMATION FROM FLORIDA TREND MAGAZINE

www.floridasmallbusiness.com

# ~ ~ The following categories of information are available if you log on to the above website. ~ ~

#### A. START-UP GUIDE

#### 1. Do You Have the Entrepreneurial Spirit?

What does it take to become a small business owner? Of course there are the basic elements: a good product or service, the right location and money. But it's your personal characteristics that will make the difference between success and failure.

Evaluate your strengths and weaknesses before setting up shop. Consider these questions suggested by the U. S. Small Business Administration.

#### 2. Legal Structure - Setting Up Your Business

There are four main legal structures from which to choose

#### 3. Forms, Permits & Licenses - An Easy Guide

Federal, State and local governments each require separate business documents. Here's an easy guide.

#### 4. Business Plan - Lay the Groundwork

Many aspiring business owners don't think about putting together a business plan - a detailed outline of the business' products or services, cash flow plan, marketing strategy, competition and other details - until a lender or potential investor requires them to put pen to paper. By then, however, they may have made critical mistakes.

#### 5. Minority Business - New Initiatives Are Working

Financing a small business

#### 6. Workforce Laws for Business - State and Federal

Once a business grows beyond a single employee, the business owner must comply with a host of Federal and State labor laws that protect workers from abuse and injury. The laws are complicated and often confusing, and it can pay to have a good labor lawyer to help you.

To get started, here's a rundown of the major laws and the agencies or departments that oversee them.

# 7. Insurance - What Coverage Is Right For You?

A necessary safety net: although insurance policies may be difficult to decipher, protecting your investment by managing risk is essential. In many cases, it's also the law. What you need. Here is what you need.

#### 8. Patents, Trademarks, Copyrights - Protect Yourself

You've invented a product, created an artistic work or adopted a name or symbol for your product. So how do you protect your hard work - your "intellectual property"?

You may need a patent, trademark or copyright. These devices will ensure that others who use, make or sell your item compensate you for it.

# B. DBA-FLORIDA: THE FLORIDA DEPARTMENT OF STATE'S REFERENCE GUIDE FOR DOING BUSINESS IN FLORIDA

### 1. Corporations

- Corporation
- For Profit Corporations
- Not-For-Profit Corporations
- Foreign
- General Information
- Alien
- Trademarks, Service Marks, Collective Marks, Certification Marks
- Fictitious Names
- Limited Liability Companies
- Partnerships
- Judgment Liens
- Information Services: Access to information filed with the division of corporations, blank forms and

publications are available through several methods and in a variety of formats. The following guide will help you obtain the type of information you need in the most expedient manner.

- Corporate Filings
- State of Florida: Who To Call
- What makes a small business work?
- Learn from their success: lessons from three successful small businesses
- Hot Topics
- 7 Tips For Selling To The Government
- So You Want To Be A Consultant?
- Health Insurance: Your Options for Today: Small Businesses must be creative to find affordable health insurance.
- 5 Business Mistakes to Avoid: Beat the Odds Against Small Businesses By Keeping Your Eye On The Risks.

#### 2. In The Know

- 11 Hot Tips For Retaining Customers
- International Trade: Tap Into a World of Opportunity
- How To Protect Yourself From Identity Theft
- Keeping Track Of Your Credit Report: Small Business Owners Need To Keep Track Of Their Credit Score
- Capital: Put Your Paperwork In Order Before You Look For a Loan. Follow this step-by-step process.
- Loans
- Grants
- Venture Capital Contacts
- Taxes: A Monthly Calendar Pay Your Fair Share, But Be Sure to Take Advantage of Tax Breaks
- E-Filing Tips
- Disney/SBA National Entrepreneur Center Now Open In Orlando: Public and private partners have teamed up to create a one-stop resource center for entrepreneurs.

#### 3. Names & Numbers You Will Need

- SBA, SBDCs and SCORE
- Enterprise Florida
- Trade Associations
- Government Resources

#### 4. Resource Directory for Small Businesses

- Link to Business and Professional Services Committed to Small Business Success: Visit www.floridasmallbusiness.com

#### 5. Florida Trend's Florida Small Business Magazine

- Learn Even More. Subscribe to Florida Trend Magazine and get Florida Trend's Small Business Advisor every month

#### C. BUSINESS DEVELOPMENT:

#### www.jbv.com/whatsnew/sbastart.htm

1. Start-Up Advise

#### 2. Starting Your Business

- Expanding Your Business
- Training/Counseling Your Business
- Advocating For Your Business
- Getting Out of Business

#### 3. Financial Assistance

#### 4. Loan Guarantees

- Equity Capital
- Disaster Loans
- Trade Financing
- Industry Finance Resources
- Surety Bond Guarantees

### 5. Workplace Issues

### 6. Equal Employment Opportunity

- Americans With Disabilities
- Workplace Laws
- Finding Skilled Workers
- Wellness in the Workplace
- Workplace Safety
- Child Care and Support
- Employee Benefits
- Pensions

#### Taxes

- Online Help for Tax Day
- Refunds
- Tax Law Assistance
- Business Services
- Forms and Publications
- Filing and Payments
- Laws and Regulations
- SSA Tax & Wage Reporting
- Miscellaneous Info
- Market Segments
- 8. Laws & Regulations

#### 9. International Trade

- Restrictions
- Country Research
- On-Line Directories
- Company Background
- Education & Training
- Product Market Research
- Trade Leads
- FAQs
- Trade Finance
- Trade Laws/Regulations
- Trade Associations --
- Travel Tips
- NAFTA
- Trade Documentation
- Export Library
- Useful Foreign Sites
- Trade Statistics
- Government Resources
- Import Information
- Trade Events/Conferences

# 10. Procurement Opportunities

- Contracting Information
- Procurement Library
- Property For Sale
- Grants and Funding
- Getting Started

#### 11. Info Desk

#### 12. Small Business Research

- State Business Programs
- Research & Statistics
- Business Cards
- Tutorials
- Disaster Assistance
- Government Acronyms
- Business Plans
- Business Services
- Assistance and Training
- Business Web Links
- Publication by Agency
- Publications Gateway
- Travel Assistance Site

#### 13. E-Services

- Online Applications
- Online Magazines
- Online Expert Tools
- Online Counseling
- Online Stores
- Online Tutorials
- Online Services & Transactions
- E-Commerce Sites
- Gov. Policy on E-Commerce
- Agencies & Gateways

Revised: 06/30/08

# 1120S

# U.S. Income Tax Return for an S Corporation

OMB No. 1545-0130

Department of the Treasury Internal Revenue Service

 Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
 ▶ See separate instructions.

2007

For calendar year 2007 or tax year beginning , 2007, ending , 20										
		on effective date Use	Name					D Empl	oyer identification nu	ımber
		IR\$							-	
вв	usines	s activity code Other-	Number, street, and room or suite no. If a P.O. box, see instructions.				E Date Incorporated			
n	umber	(see instructions) wise,								
		print or type.	City or town, state, and ZIP of	ode				F Total	assets (see instruction	15)
		Sch. M-3						_		,
	tached	· · · · · · · · · · · · · · · · · · ·		,,,,,,				<u>\$</u> _	· · · · · · · · · · · · · · · · · · ·	
			in S corporation beginning with			lf "Yes," a	ittach Fo	orm 255	53 if not already filed	
H C	heck	if: (1) 🔲 Final return								
		(4) Amended re								
			ders in the corporation at usiness income and expens			inotruot				
Cat	Γ							Т.	momadon.	Т
	l .	Gross receipts or sales	b Less					1c 2		+-
Income	2	-	chedule A, line 8)					3		+
ĕ	3	Gross profit. Subtract						4		+
<u> </u>	4		orm 4797, Part II, line 17 (a					5		+
	5   6		ee instructions—attach stat Add lines 3 through 5,    ,					6		+
_	<del></del>							7		+
Suo	7		ers					8		+
tā Et	8	- '	ess employment credits).					9		+-
<u>Ξ</u>	9		nce					10		+-
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뜷	12							13		+
instructions for limitations)	13							14		1
<u>.</u>	14	-	ed on Schedule A or elsev					15		+-
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S	16						• •	17		+
<u>ö</u> ,	17		, etc., plans				• •	18		+
ಕ್ಷ	18		grams,					19		+
Deductions	19 20		ch statement)					20		+-
۵	21		come (loss). Subtract line					21		+
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	۱ .	-	(Form 1120S)		001					
¥	ם מ		(Form 11203)		L. This L. L.	********		22c		
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툸	Zoa h	Tay denosited with Fo	orm 7004	it credited to 2007	23b					
Δ.		Credit for federal tax t	paid on fuels (attach Form	 4136)	23c					
and	d		•					23d		
ā	24	•		Form 2220 is att	ached .		<b>–</b>	24		
Tax	25	• •	mated tax penalty (see <i>instructions</i> ). Check if Form 2220 is attached					25		
	26		3d is larger than the total of					26		
	27	Enter amount from line	e 26 Credited to 2008 est	imated tax 🕨		Refun	ded 🕨			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.							ny knowledge and belief,	it is true,		
Si	- 1		mon or property fames men revolute	., 54004 511 411 1110/111		o. nao any		Ma	y the IRS discuss this	
He	ere			<b>)</b> .					h the preparer shown e instructions)? ☐ Yes	
_		Signature of officer			Title			(56	<del></del>	
Pai	id	Preparer's		,	Date	Chec			Preparer's SSN or PTIN	4
Prepare		signature		1		self-e	employed			
	•	vours if self-employ	ed),				EIN	_ !		
080	e On	address, and ZIP co	ode 🔻				Phone n	10. (	)	

Form	11208 (2007)	Page a					
Sch	edule A Cost of Goods Sold (see instructions)						
1	Inventory at beginning of year	1					
2	Purchases	2					
3	Cost of labor	3					
4	Additional section 263A costs (attach statement) , , , ,	4					
5	Other costs (attach statement)	5					
6	<b>Total.</b> Add lines 1 through 5	6					
7	Inventory at end of year	7					
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2	8					
9a							
	(ii) Lower of cost or market as described in Regulations section 1.471-4						
	(iii) ☐ Other (Specify method used and attach explanation.) ►						
b	Check if there was a writedown of subnormal goods as described in Regulations section 1.471-2(c)						
С.	Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form	11970) ▶ □					
	If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO	9d					
е	If property is produced or acquired for resale, do the rules of section 263A apply to the corporation?	Yes N					
f	Was there any change in determining quantities, cost, or valuations between opening and closing inv	rentory? 🗌 Yes 🔲 N					
Α.	If "Yes," attach explanation.	V   N-					
Sci	nedule B Other Information (see instructions)	Yes No					
1	Check accounting method: a ☐ Cash b ☐ Accrual c ☐ Other (specify) ▶						
2	See the instructions and enter the:						
_	a Business activity ▶ b Product or service ▶						
3	At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock and the voting stock of the voting st						
	corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a statement showing: (a) name and employer						
4	identification number (EIN), (b) percentage owned, and (c) if 100% owned, was a QSub election made has this corporation filed, or is it required to file, a return under section 6111 to provide information or						
4	transaction?	any reportable					
5	Check this box if the corporation issued publicly offered debt instruments with original issue discount						
•	If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original	130538445913092040					
	Instruments.						
6	If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation	on acquired an					
	asset with a basis determined by reference to its basis (or the basis of any other property) in						
	C corporation and (b) has net unrealized built-in gain (defined in section 1374(d)(1)) in excess of the						
	built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in	gain from prior					
	years						
7	Enter the accumulated earnings and profits of the corporation at the end of the tax year.						
8	Are the corporation's total receipts (see instructions) for the tax year and its total assets at the end						
Cal	less than \$250,000? If "Yes," the corporation is not required to complete Schedules L and M-1 tedule K Shareholders' Pro Rata Share Items	Total amount					
SU		1					
	1 Ordinary business income (loss) (page 1, line 21)	2					
	2 Net rental real estate income (loss) (attach Form 8825)						
	da Other gross rental income (1033)						
76	D Expenses from other femal delivities futures entering.	3c					
Š	4 Interest income	4					
5	5 Dividends: a Ordinary dividends	5a					
Income (Loss)	b Qualified dividends						
ည္တ	6 Royalties	6					
-	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7					
	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a					
	b Collectibles (28%) gain (loss)						
	c Unrecaptured section 1250 gain (attach statement) 8c						
	9 Net section 1231 gain (loss) (attach Form 4797)	9					
	10 Other income (loss) (see instructions) TVD9	10					

Page 3

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	Shareholders' Pro Rata Share Items (continued)		Total amount	
Deductions	11 Section 179 deduction (attach Form 4562)	11		
	12a Contributions	12a	***	
	b Investment interest expense	12b		
ĕ	c Section 59(e)(2) expenditures (1) Type ► (2) Amount ►	12c(2)		
	d Other deductions (see instructions) Type ▶	12d		
	13a Low-income housing credit (section 42(j)(5))	13a		
	b Low-income housing credit (other)	13b		
Credits	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c		
	d Other rental real estate credits (see instructions) Type ▶	13d		
	e Other rental credits (see instructions) Type ▶	13e		
	f Credit for alcohol used as fuel (attach Form 6478)	13f		
	g Other credits (see instructions)	13g		
	14a Name of country or U.S. possession ▶			
	b Gross income from all sources	14b		
	c Gross income sourced at shareholder level	14c		
	Foreign gross income sourced at corporate level			
-	·	14d		
က္ဆ	d Passive category	14e		
. <u>ē</u>	e General category	14f	·	
30	f Other (attach statement)			
l iš	Deductions allocated and apportioned at shareholder level	14g		
គួ	g Interest expense	14h		
É	h Other			
e e	Deductions allocated and apportioned at corporate level to foreign source income	14i		
Foreign Transactions	i Passive category	14j		
	j General category	14k		
	k Other (attach statement)	140		
	Other information	141		
	I Total foreign taxes (check one): ► ☐ Paid ☐ Accrued			
	m Reduction in taxes available for credit (attach statement)	14m		West S
				2012/00
× 6	15a Post-1986 depreciation adjustment , , , , , , , , , , , , , , ,	15a		<b></b>
tive Ta	<b>b</b> Adjusted gain or loss , , , ,	15b		
ma nur T) tt	c Depletion (other than oil and gas)	15c		$\vdash$
Alternative Minimum Tax (AMT) Items	d Oil, gas, and geothermal properties—gross income	15d		
Z 2	e Oil, gas, and geothermal properties—deductions.	15e		_
	f Other AMT items (attach statement)	15f		
je je	16a Tax-exempt interest income , , , , ,	16a		
Items Affecting Shareholder Basis	<b>b</b> Other tax-exempt income	16b		
arel Ba	c Nondeductible expenses	16c		
S S	d Property distributions	16d		-
<del>=</del>		16e		
_ 활	17a Investment income	17a		
Other formati	b Investment expenses	17b	<del> </del>	<del> </del>
قِ ۃ	c Dividend distributions paid from accumulated earnings and profits	17c		September 1
트	d Other items and amounts (attach statement)			30. 2
Recon-Other ciliation Information				
ia ec	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right		1	
ന്. മ	column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	J	L

Page	
Page	•

Sch	edule L Balance Sheets per Books	Beginning of t	tax year	End of t	ax year			
	Assets	(a)	(b)	(c)	(d)			
1	Cash			1				
2a	Trade notes and accounts receivable, , ,							
b	Less allowance for bad debts			( )				
3	Inventories			4.00				
4	U.S. government obligations							
5	Tax-exempt securities (see instructions)							
6	Other current assets (attach statement)							
7	Loans to shareholders			4.65				
8	Mortgage and real estate loans							
9	Other investments (attach statement) Buildings and other depreciable assets	and the second s						
10a b	Less accumulated depreciation,	( )	recursor representativos de la company d	( )	PROSECULOR SOCIAL PROSECULOR SOCIAL S			
11a	Depletable assets			,				
b	Less accumulated depletion	( )		(				
12	Land (net of any amortization)							
13a	Intangible assets (amortizable only)	1						
b	Less accumulated amortization	( )						
14	Other assets (attach statement)							
15	Total assets							
	Liabilities and Shareholders' Equity							
16	Accounts payable	_						
17	Mortgages, notes, bonds payable in less than 1 year.							
18	Other current liabilities (attach statement) .							
19	Loans from shareholders							
20	Mortgages, notes, bonds payable in 1 year or more Other liabilities (attach statement)							
21								
22 23	Capital stock							
24	Retained earnings							
25	Adjustments to shareholders' equity (attach statement)							
26	Less cost of treasury stock	(	)		( )			
27	Total liabilities and shareholders' equity							
Sci	nedule M-1 Reconciliation of Income Note: Schedule M-3 required	(Loss) per Books Wi	ith Income (Loss	s) per Return \$10 million or more—	ego instructions			
	· · · · · · · · · · · · · · · · · · ·				-see manuchons			
1	Net income (loss) per books		on Schedule K, lines 1 t	oks this year not included hrough 10 (itemize):				
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this		-	st \$				
	year (itemize):							
3	Expenses recorded on books this year not			on Schedule K, lines				
-	included on Schedule K, lines 1 through 12			I, not charged against				
	and 14I (itemize):		book income this ye	ar (itemize):				
а	Depreciation \$	a	Depreciation \$					
b	Travel and entertainment \$							
4	Add lines 1 through 3		Income (loss) (Schedule K		d Charabaldara			
Sc	Schedule M-2  Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)							
	Onalognous Carabio III.	(a) Accumulated	<del></del>		areholders' undistributed			
		adjustments account			income previously taxed			
1	Balance at beginning of tax year		7.8047.007.00 L. 1.00 L. 1.00 L.	ech (0) (4) (12) (2) (2) (2) (2) (2) (2) (2) (2) (2) (	i i i i i i i i i i i i i i i i i i i			
2	Ordinary income from page 1, line 21							
3								
4	Other additions	(						
5	Other reductions		710	<u></u>				
6	Combine lines 1 through 5 , , ,							
7 8	Distributions other than dividend distributions Balance at end of tax year. Subtract line 7 from line 6							
	Data too at one or tax year. Outstatt line / from line o			<u> l l </u>				