

EXHIBIT F

Gross Receipts Paid by United Tenant Account - Owed By Partnership to United

Year	Month	Amount
1993	29-Mar	1226.29
1994	28-Feb	647.39
1994	29-Mar	974.49
1994	28-Apr	978.29
1994	31-May	602
1994	30-Jun	1582.57
1994	31-Aug	1015.04
1994	30-Sep	1303.75
1994	31-Oct	1242.37
1994	30-Nov	1079.4
1994	30-Dec	1485.41
1994		1360.66
1995	31-Jan	1789.58
1995	1-Dec	1557.14
1996	1-Feb	1598.27
1996	1-Mar	1069.07
1996	1-Apr	1366.72
1996	1-May	1184.04
1996	1-Jun	1288.54
1996	1-Jul	1231.24
1996	1-Aug	1199.02
1996	1-Sep	1271.85
1996	1-Oct	1052.23
1996	1-Dec	1215.26
1999	30-May	1,161.38
1999	29-Jun	1285.42
1999	30-Jul	1395.83
1999	27-Aug	1605.26
1999	30-Sep	1470.76
1999	29-Dec	1224.04
2000	1-Jan	1569.18
2000	31-Jan	1637.16
2000	28-Feb	1,322.54
2000	28-Apr	1298.78
2000	30-Jun	970.58
2000	28-Jul	1344.36
2000	29-Aug	816.79
2000	30-Sep	1628.66
2000	30-Oct	1097.58
2000	29-Nov	1620.79
2000	26-Dec	1777.5
2001	30-Jan	1333.53
2001	28-Feb	815.04
2001	29-Mar	1370.89

2001	26-Apr	1968.46
2001	30-May	925.85
2001	29-Jun	1402.45
2001	20-Aug	223.51
		60586.96

UNITED CORPORATION
TENANT ACCOUNT
PO BOX 783
CHRISTIANSTED VI 00821-0783
PHONE 509-778-6240

0342008940045 0427

101-900218

TO THE
ORDER OF

Bureau of
one thousand two hundred

RECEIVED

3 - 29 19 93

\$ 1,226.29

DOLLARS

Core States
First Pennsylvania Bank

1993 Feb. Cross

PAID

⑆00000427⑆ ⑆0216⑆ ⑆6001⑆ ⑆1130021601⑆ ⑆0000113729⑆

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

01

CURRENT MONTH

1 06

10184

EXEMPTIONS

0

TAXABLE INCOME

647

(multiply)

4% Tax Rate

1994

UNITED CORPORATICN
CHRISTIANS TED

V0C821

TOTAL AMOUNT DUE

647 39

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

02

CURRENT MONTH

1 06

24362

EXEMPTIONS

0

TAXABLE INCOME

974

(multiply)

4% Tax Rate

1994

UNITED CORPORATICN
CHRISTIANS TED

V0C821

TOTAL AMOUNT DUE

974 49

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

03

CURRENT MONTH

1 06

24362

EXEMPTIONS

0

TAXABLE INCOME

978

(multiply)

4% Tax Rate

1994

UNITED CORPORATICN
CHRISTIANS TED

V0C821

TOTAL AMOUNT DUE

978 39

UNITED CORPORATION
TENANT ACCOUNT
PO BOX 763
CHRISTIANGTED VI 00821-0763
PHONE 809-778-6240

0665

101-600210

PAY
TO THE
ORDER OF

V.I. Bureau of Internal Revenue

2-28 1994

\$ *647.39*

Six Hundred Forty Seven and 39/100

DOLLARS



CoreStates
First Pennsylvania Bank
Chartered Branch
St. Croix, U.S.V.I.

FOR

Jan. 94 Cross Receipts Tax

John J. Smith

⑈00000665⑈ ⑆021606001⑆ ⑆001130021601⑈

Jan. 94

	1	2	3	4
1	Bal. in Bank		16,432.34 -	1
2	3		1,500.00 -	2
3	3		375.00 -	3
4	4		1,190.00 -	4
5	5		675.00 -	5
6	10		1,190.00 -	6
7	11		800.00 -	7
8	18		2,198.10 -	8
9	18		2,645.83 -	9
10	18		2,200.00 -	10
11	26		975.00 -	11
12	26		475.00 -	12
13	28	10,176.89	XX	13
14	31		65.00 -	14
15	31		797.91 -	15
16			<u>32,617.18</u>	16
17				17
18				18

Form 720 V.1.
(Rev. 11-18-83)

GROSS RECEIPTS TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

01

CURRENT MONTH

16,184 84

- 00 -

= 16,184 84

x .06

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME (multiply) 4% Tax Rate

(equals) TAX DUE

(1) \$ 647 39

1994

IF LATE PAYMENT:
Multiply by .05 per Month
(5% per Month Penalty Rate)

(2) \$ - - -

Multiply by .01 per Month
(Interest Rate 12% per Year)

(3) \$ - - -

UNITED CORPORATION

PO BOX 763
CHRISTIANSTED

V00821

TOTAL AMOUNT DUE

sum (1), (2), and (3)
647 39

(Submit this amount with tax return)
(See Instructions on back)

March, 1993

1	Bal. in Bank		26,435.92
2	1	Returned -	416.50
3	1		140.00
4	1		475.00
5	2		400.00
6	3		750.00
7	3		2,290.99
8	4	Returned -	781.20
9	4		517.83
10	7		2,175.00
11	8		1,750.00
12	11		1,250.00
13	14		7,542.50
14	22		1,000.00
15	22		800.00
16	24		2,645.83
17	29	8,939.90	1,190.00 Xx
18	30		340.00
19	31		1,190.00
20			52,090.87
21			

Form 720 V.I.
(Rev. 11-18-83)

GROSS RECEIPTS TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

03

CURRENT MONTH

24,457.15

GROSS RECEIPTS (minus)

0.00

EXEMPTIONS

24,457.15

(equals) TAXABLE INCOME

X

04

(multiply) 4% Tax Rate

1994

(equals) TAX DUE

(1) \$ 978.29

IF LATE PAYMENT:
Multiply by .05 per Month
(5% per Month Penalty Rate)

(2) \$ - - -

Multiply by .01 per Month
(Interest Rate 12% per Year)

(3) \$ - - -

sum (1), (2), and (3)

UNITED CORPORATION

PO BOX 763
CHRISTIANSTED

V00821

TOTAL AMOUNT DUE

\$ 978.29

(Submit this amount with tax
(See Instructions))

"PAID"
4/23/94
C.K. No. 2

Form 720 V.I.
(Rev. 11-18-83)
660391237

GOVERNMENT OF THE VIRGIN ISLANDS
EMPLOYER IDENTIFICATION NUMBER

08684

05

04

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

04

1994

UNITED CORPORATION
CHRISTIANSTED

V00221

TOTAL AMOUNT DUE

602.00

(Submit this amount with tax return (See Instructions on back))

IF LATE PAYMENT: Multiply by .05 per Month (5% per Month Penalty Rate)

MAY 31 1994

04

Form 720 V.I.
(Rev. 11-18-83)
660391237

GOVERNMENT OF THE VIRGIN ISLANDS
EMPLOYER IDENTIFICATION NUMBER

08684

05

04

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

04

1994

UNITED CORPORATION
CHRISTIANSTED

V00221

TOTAL AMOUNT DUE

1082.00

(Submit this amount with tax return (See Instructions on back))

IF LATE PAYMENT: Multiply by .05 per Month (5% per Month Penalty Rate)

JUN 5 0 1994

04

Form 720 V.I.
(Rev. 11-18-83)
660391237

GOVERNMENT OF THE VIRGIN ISLANDS
EMPLOYER IDENTIFICATION NUMBER

08684

05

04

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

04

1994

UNITED CORPORATION
CHRISTIANSTED

V00221

TOTAL AMOUNT DUE

1380.66

(Submit this amount with tax return (See Instructions on back))

IF LATE PAYMENT: Multiply by .05 per Month (5% per Month Penalty Rate)

MAY 29 1994

04

Multiply by .01 per Month (Interest Rate 12% per Year)

MAY 29 1994

04

Form 720 V.I.
(Rev. 11-18-83)

GROSS RECEIPTS TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

660391237

EMPLOYER IDENTIFICATION NUMBER

08684

SERIAL NUMBER

05

CURRENT MONTH

39,564.23

GROSS RECEIPTS (minus)

EXEMPTIONS

39,564.23

(equals) TAXABLE INCOME

x .04

(multiply) 4% Tax Rate

1994

(equals) TAX DUE

(1) \$ 1,582.17

IF LATE PAYMENT:
Multiply by .05 per Month
(5% per Month Penalty Rate)

(2) \$ ---

Multiply by .01 per Month
(Interest Rate 12% per Year)

(3) \$ ---

sum (1), (2), and (3)

UNITED CORPORATION

PO BOX 763
CHRISTIANSTED

VO0821

TOTAL AMOUNT DUE

1,582.17

(Submit this amount with tax return)
(See Instructions on back)

UNITED CORPORATION-TENANTS ACCOUNT
PLAZA EXTRA
TEL (809) 778-8240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

147

101-800/216

JUNE 30, 1994

OF V.I. BUREAU OF INTERNAL REVENUE \$ 1,582.17

THOUSAND FIVE HUNDRED EIGHTY-TWO DOLLARS AND 17/100 DOLLARS

CoreStates
First Pennsylvania Bank
Christiansted Branch
St. Croix, U.S.V.I.

GROSS RECEIPT TAX - MAY 1994

⑈0000 147⑈ ⑆02160600⑆ 182⑈600135⑈

Form 720 V-1 (Rev. 11-18-83) GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER 660391237
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE

1994

UNITED CORPORATION
 PO BOX 763
 CHRISTIANSTED

GROSS RECEIPTS, TAX RETURN
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (equals) TAX DUE
 LATE PAYMENT:
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (Interest Rate 12% per Year)

GROSS RECEIPTS (minus) EXEMPT PROGRESS TAXABLE INCOME
 X
 (multiply) 4% Tax Rate

(1) \$ 1010.00
 (2) \$ 10.00
 (3) \$ 10.00
 sum (1), (2), and (3)
 \$ 1030.00

(Submit this amount with tax return) (See Instructions on back)

TOTAL AMOUNT DUE \$ 1030.00

Form 720 V-1 (Rev. 11-18-83) GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER 660391237
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE

1994

UNITED CORPORATION
 PO BOX 763
 CHRISTIANSTED

GROSS RECEIPTS, TAX RETURN
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (equals) TAX DUE
 LATE PAYMENT:
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (Interest Rate 12% per Year)

GROSS RECEIPTS (minus) EXEMPT PROGRESS TAXABLE INCOME
 X
 (multiply) 4% Tax Rate

(1) \$ 1000.00
 (2) \$ 10.00
 (3) \$ 10.00
 sum (1), (2), and (3)
 \$ 1020.00

(Submit this amount with tax return) (See Instructions on back)

TOTAL AMOUNT DUE \$ 1020.00

Form 720 V-1 (Rev. 11-18-83) GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER 660391237
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE

1994

UNITED CORPORATION
 PO BOX 763
 CHRISTIANSTED

GROSS RECEIPTS, TAX RETURN
 RECEIVED WITH REMITTANCE TO DIRECTOR'S OFFICE
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (equals) TAX DUE
 LATE PAYMENT:
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
 (Interest Rate 12% per Year)

GROSS RECEIPTS (minus) EXEMPT PROGRESS TAXABLE INCOME
 X
 (multiply) 4% Tax Rate

(1) \$ 1000.00
 (2) \$ 10.00
 (3) \$ 10.00
 sum (1), (2), and (3)
 \$ 1020.00

(Submit this amount with tax return) (See Instructions on back)

TOTAL AMOUNT DUE \$ 1020.00

035-0062

Form 720 V.I. (Rev. 11-18-83) GROSS RECEIPTS TAX RETURN OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER: 660391237
 EMPLOYER IDENTIFICATION NUMBER: 08684
 SERIAL NUMBER: 10
 CURRENT MONTH: 10

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

UNITED CORPORATION
 CHRISTIANSTED

VCG821

TOTAL AMOUNT DUE

(equals) TAX DUE
 IF LATE PAYMENT PENALTY
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 Multiply by .01 per Month
 (Interest Rate 12% per Year)

X		7%
(multiply)		4% Tax Rate
(1)	\$ 1079	148
(2)	\$	0
(3)	\$	0
sum (1), (2), and (3)	\$ 1079	148

(Submit this amount with tax return (See Instructions on back))

Form 720 V.I. (Rev. 11-18-83) GROSS RECEIPTS TAX RETURN OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER: 660391237
 EMPLOYER IDENTIFICATION NUMBER: 08684
 SERIAL NUMBER: 11
 CURRENT MONTH: 11

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

UNITED CORPORATION
 CHRISTIANSTED

VCG821

TOTAL AMOUNT DUE

(equals) TAX DUE
 IF LATE PAYMENT PENALTY
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 Multiply by .01 per Month
 (Interest Rate 12% per Year)

X		7%
(multiply)		4% Tax Rate
(1)	\$ 1985	141
(2)	\$	0
(3)	\$	0
sum (1), (2), and (3)	\$ 1985	141

(Submit this amount with tax return (See Instructions on back))

Form 720 V.I. (Rev. 11-18-83) GROSS RECEIPTS TAX RETURN OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 EMPLOYER IDENTIFICATION NUMBER: 660391237
 EMPLOYER IDENTIFICATION NUMBER: 08684
 SERIAL NUMBER: 12
 CURRENT MONTH: 12

GROSS RECEIPTS (minus) EXEMPTIONS (equals) TAXABLE INCOME

1994

UNITED CORPORATION
 CHRISTIANSTED

VCG821

TOTAL AMOUNT DUE

(equals) TAX DUE
 IF LATE PAYMENT PENALTY
 Multiply by .05 per Month
 (5% per Month Penalty Rate)
 Multiply by .01 per Month
 (Interest Rate 12% per Year)

X		7%
(multiply)		4% Tax Rate
(1)	\$ 1789	128
(2)	\$	0
(3)	\$	0
sum (1), (2), and (3)	\$ 1789	128

(Submit this amount with tax return (See Instructions on back))

035-0063

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

AJE #2

January 1996

<u>Check #</u>	<u>G/L Acct. #</u>	<u>Disbursements</u>
565	5300	566.00 * Alfred Ferrol
566	5350	27.20 * Bob-A-Ru
567	1201	15,900.00 * Plaza Transfer
568	5300	659.58 * Barthelmy Joseph
569	0	Void * Void
570	6690	600.00 * Larry Motta
571	6690	300.00 * Larry Motta
572	5300	2,400.00 Rudy Caines
573	5300	35.00 * Luis Laurencin
574	5300	226.05 * Texaco Caribbean
575	1201	30,300.00 * Plaza Transfer
576	6690	303.75 * Larry Motta
577	5300	1,200.00 Rudy Caines
578	5300	291.00 * The Glass Shop
579	5300	90.00 * Ocean Systems
580	5300	200.00 * Robert Rivera
581	6690	307.66 Larry Motta
582	6150	146.89 STSJ Telephone
583	5300	60.00 Lonis Laurencin
584	5300	748.00 The Glass Shop
585	2200	1,557.14 Gross Receipts - Dec. 1996
586	5250	187.50 Bryant, White
		56,105.77

Virgin Islands Community Bank
 Account #182--600195
 Tenant Account

AJE #2

February 1996

Check #	G/L Acct. #	Disbursements
587	5300	1,500.00 * Alfred Ferrol
588	6690	200.00 * Robert Rivera
589	6690	300.00 * Larry Motta
590	5300	2,700.00 Rudt Calnes
591	6250	1,054.02 * WAPA
592	5300	611.10 * Pan Am Dist.
593	5300	114.00 * Pan Am Dist.
594	6250	530.50 * WAPA
595	6690	200.00 * Robert Rivera
596	6690	311.05 * Larry Motta
597	5400	38.25 * St. Croix Avis
598	6150	✓ 97.92 * VITELCO
599	5300	90.00 * Enger Phillips
600	5300	807.31 * Alfred Ferrol
601	6690	200.00 * Robert Rivera
602	6690	316.45 * Larry Motta
603	5300	75.00 Dad V. Onestop
604	5300	90.00 * Ocean System
605	5300	700.00 * James Estridge
606	6690	200.00 * Robert Rivera
607	5300	165.00 Sunny Refridg.
608	6690	315.49 * Larry Motta
609	6150	✓ 36.63 * VITELCO
610	6710	✓ 1,000.00 * Usra Yusuf
611	2200	1,598.27 V.I. B.I.R. - Gross Tax
612	6150	✓ 117.17 STSJ Telephone
613	0	Void * Void
		13,368.16

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

AJE #2

March 1996

Check #	G/L Acct. #	Disbursements
614	6690	200.00 * Roberto Rivera
615	1201	3,000.00 * Plaza Extra
616	5300	257.00 * Errol Lindsey
617	6690	304.70 * Larry Motta
618	1201	34.98 * Plaza Extra
619	6690	200.00 * Roberto Rivera
620	5300	46.50 * Frederick Barry
621	6690	300.00 * Larry Motta
622	6250	907.63 * WAPA
623	6250	220.46 * WAPA
624	6690	200.00 * Roberto Rivera
625	5300	180.00 * Errol Lindsey
626	6690	314.25 * Larry Motta
627	5300	1,200.00 Rudy Caines
628	6150	✓134.85 STSJ Telephone
629	5300	218.50 Roof tops
630	6690	200.00 * Roberto Rivera
631	6690	311.25 * Larry Motta
632	5300	1,200.00 Rudy Caines
633	6150	✓33.15 * Viteico
634	2200	1,069.07 VIBIR - Gross Receipts - Feb 1996

10,532.34

072-2053

FY 014968

Virgin Islands Community Bank
Account #182-600135
Tenant Account

G/L #1058

AJE #2

April 1996

Check #	G/L Acct. #	Disbursements
635	6690	200.00 * Roberto Rivera
636	6690	300.00 * Larry Motta
637	5300	1,500.00 * Rudy Caines
638	5300	90.00 * Ocean Systems
639	5300	30.00 * Edgar Phillips
640	6250	962.02 * WAPA
641	1201	6,000.00 * Plaza Transfer
642	6690	160.00 * Roberto Rivera
643	5300	55.97 * Glidden Paint
644	6250	321.94 * WAPA
645	6690	305.97 * Larry Motta
646	5400	127.50 St. Croix Avis
647	5250	2,247.43 * Bryant, White
648	5250	37.50 * Bryant, White
649	1201	6.98 * Plaza Transfer
650	5350	34.10 * Ferst Office Supply
651	6690	200.00 * Roberto Rivera
652	6690	301.70 * Larry Motta
653	6760	✓2,400.00 Internal Revenue Service - F. Yusuf
654	6840	✓500.00 * V.I. Bureau of Internal Rev. - F. Yusuf
655	1201	5,000.00 * Plaza Transfer
656	0	Void * Void
657	5300	1,003.33 * Joe Greenway
658	6690	200.00 * Roberto Rivera
659	1201	2,000.00 Plaza Transfer
660	6690	302.95 * Larry Motta
661	5300	2,800.00 * Gregory Schuster
662	5300	6,234.00 Florida Welding
663	1201	8,000.00 Plaza Transfer
664	6150	✓ 41.98 STSJ Global
665	5300	436.45 ABC Services
666	6690	200.00 Roberto Rivera
667	6690	300.00 Larry Motta
668	5300	1,800.00 Rudy Caines
669	6150	✓ 30.01 * Vitelco
670	6650	1,366.72 V.I. Bureau of Internal Revenue

Total:

45,498.55

072-2054

FY 014969

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2

May 1996

Check #	G/L Acct. #	Disbursements
671	4500	492.00 * Crowley American
672	6710	500.00 * Joseph Greenway
673	5300	90.00 * Ocean Systems
674	6690	200.00 * Roberto Rivera
675	6690	300.00 * Larry Motta
676	6710	29.75 St. Croix
677	6250	1,109.09 * WAPA
678	6250	383.56 * WAPA
679	5300	1,551.60 * Superior Block
680	6050	1,117.84 * Caribe Do-It Center
681	6690	300.00 * Larry Motta
682	6690	200.00 * Robert Rivera
683	5300	1,200.00 * Rudy Calnes
684	6150	291.42 * Cellular One
685	6050	1,145.94 * Caribe Do-It Center
686	6710	400.24 * Shnama
687	1201	4,000.00 Plaza Extra - Transfer
688	6690	200.00 * Robert Rivera
689	5300	263.00 * Joseph Greenway
690	6690	304.40 * Larry Motta
691	1201	13,000.00 * Plaza Extra - Transfer
692	1201	1,500.00 * Plaza Extra - Transfer
693	6050	3,056.60 * Caribe Do-It Center
694	6710	30.00 * Olson Williams
695	5300	259.38 * Pet-Lock Electrical Supply
696	1201	3,500.00 Plaza Extra - Transfer
697	5300	1,935.06 * Floor Specialists
698	5300	128.94 * Gildden Paint Co.
699	6690	315.00 * Larry Motta
700	6690	200.00 * Robert Rivera
701	5300	306.15 Sonny's Refridgeration
702	6050	454.15 * Caribe Do-It Center
703	5300	441.84 * Gildden Paint Co.
704	0	Void * Void
705	0	Void * Void
706	6050	98.00 * Caribe Do-It Center
707	5300	40.00 ABC Services
708	2200	1,184.04 VIBIR - Gross Recelpts - April 1996
709	1201	5,500.00 Plaza Extra - Transfer
710	6050	599.00 Caribe Do-It Center
711	5300	486.00 Gulf Coast Custom Kitchen
712	6690	200.00 Robert Rivera

47,323.00

072-2055

FY 014970

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2

		June 1996		
Check #	G/L Acct. #	Disbursements		
713	6150	✓ 24.93 *	Vitelco	
714	6150	✓ 199.26 *	Global Telephone	
715	6250	969.97 *	WAPA	
716	6690	300.00 *	Larry Motta	
717	5300	✓ 5,099.99 *	Scotiabank - Yusuf	
718	5300	254.05 *	Pet-Lock Electrical	
719	1201	5,000.00 *	Plaza Transfer	
720	6250	277.93 *	WAPA	
721	6690	200.00 *	Roberto Rivera	
722	5300	18.99 *	Plaza Extra	
723	6690	300.00 *	Larry Motta	
724	4500	290.00 *	Bates Trucking	
725	1201	3,500.00 *	Plaza Transfer	
726	6690	200.00 *	Roberto Rivera	
727	1201	10,000.00 *	Plaza Transfer	
728	6710	1,202.17 *	Laureach Francis	
729	6690	300.00 *	Larry Motta	
730	5300	1,900.00	Rudy Caines	
731	5250	4.50 *	Bryant, White et al	
732	5300	318.93 *	Plaza Transfer	
733	6115	109.00 *	Caribe Do-It Center	
734	6150	✓ 154.55	STSJ Global	
735	6115	1,504.95 *	Caribe Do-It Center	
736	6690	200.00 *	Roberto Rivera	
737	6690	319.43 *	Larry Motta	
738	6150	✓ 40.30 *	Vitelco	
739	5300	90.00 *	Ocean System	
740	1201	6,000.00	Plaza Transfer	
741	5300	336.00 *	V.I. Cement	
742	1201	2,000.00	Plaza Transfer	
743	2200	1,288.54	Gross Receipts	
744	6690	200.00	Roberto Rivera	
745	6690	310.62	Larry Motta	
746	5300	1,600.00	Rudy Caines	
Total:		44,514.11		

072-2056
 FY 014971

Virgin Islands Community Bank
 Account # 182-600135
 Tenant Account

G/L #1058

AJE #1

July 1996

Check #	G/L Acct. #	Disbursements
747	6250	996.02 * WAPA
748	1201	1,000.00 * Plaza Transfer
749	5300	695.52 * Quality Electric
750	6710	200.00 * Roberto Rivera
751	1201	4,182.00 * Plaza Transfer
752	6690	306.69 * Larry Motta
753	5300	90.00 * Ocean Systems
754	0	Void * Void
755	6250	450.54 * WAPA
756	5300	4,500.00 * Jeseoph Greenway
757	6710	200.00 * Roberto Rivera
758	6690	300.00 * Larry Motta
759	5300	1,900.00 * Rudy Calnes
760	5400	231.00 * St. Croix Avis
761	5300	500.00 * Jeseoph Greenway
762	6150	✓ 93.60 * Telephone
763	6710	200.00 * Roberto Rivera
764	6710	200.00 * Roberto Rivera
765	6150	✓ 36.30 * Vitelco
766	6690	300.00 * Larry Motta
767	5300	1,824.00 * VI Cement
768	6690	315.20 * Larry Motta
769	6250	938.16 * WAPA
770	6650	1,231.24 * Gross Receipts - June 1996
771	1199	17,000.00 * Mohamed Y. Hamdan - Interest Payment

37,690.27

G/L #1058

072-2057

FY 014972

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2

August 1996

Check #	G/L Acct. #	Disbursements
772	1201	10,000.00 * Plaza Extra
773	6710	200.00 * Roberto Rivera
774	5300	415.00 Joseph Greenway
775	6690	319.40 * Larry Motta
776	5300	593.90 * Sonny's A/C Services
777	5300	90.00 * Ocean Systems Lab
778	6710	200.00 * Roberto Rivera
779	5300	1,900.00 * Rudy Caines
780	6690	300.00 * Larry Motta
781	6250	237.30 * WAPA
782	1201	3,500.00 * Plaza Extra
783	5300	825.00 * Atlantic Elevator Sales
784	5800	10.75 * Postage
785	6710	200.00 * Roberto Rivera
786	6250	13.49 * WAPA
787	6690	300.00 * Larry Motta
788	1201	4,300.00 Plaza Extra
789	6710	200.00 Roberto Rivera
790	6690	300.00 * Larry Motta
791	6150	✓ 267.72 Telephone
792	1201	12,000.00 Plaza Extra
793	6650	1,199.02 Gross Receipts Tax
794	6710	200.00 Roberto Rivera
795	6150	✓ 32.44 Telephone
796	6690	300.00 Larry Motta
797	6250	393.82 WAPA
798	5300	2,000.00 Rudy Caines

40,297.84

072-2058
 FY 014973

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2

September 1996

<u>Check #</u>	<u>G/L Acct. #</u>	<u>Disbursements</u>
799	6250	307.97 * WAPA
800	6710	200.00 * Roberto Rivera
801	5300	90.00 * Ocean Systems
802	5300	300.00 Rudy Caines
803	6690	300.00 * Larry Motta
804	6710	200.00 * Roberto Rivera
805	6690	303.42 * Larry Motta
806	6150	137.95 * Telephone
807	6710	111.60 * Cruz Rivera
808	2635	4,086.62 * Tropical Shipping - Ship Auto
809	1201	950.00 Plaza Extra
810	5300	320.00 STX Trading - Building Materials
811	6710	200.00 * Roberto Rivera
812	6690	300.00 Larry Motta
813	6150	38.30 * Telephone
814	5150	225.00 * Brammer Chasen & O'Connell
815	6710	200.00 Roberto Rivera
816	5300	90.00 Ocean Systems
817	5300	1,022.50 Gar Services
818	6115	549.19 Carib-Do-It-Center
819	6690	300.00 Larry Motta
820	6250	399.18 * WAPA
821	6650	1,271.85 Gross Receipts Tax - Aug. 1996
		11,903.58

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2

October 1996

Check #	G/L Acct. #	Disbursements
822	1201	12,000.00 * Plaza Transfer
823	6710	200.00 * Roberto Rivera
824	6250	1,478.14 * WAPA
825	6690	312.00 * Larry Motta
826	5300	1,900.00 * Rudy Caines
827	6710	200.00 * Roberto Rivera
828	6690	300.00 * Larry Motta
829	6710	65.00 * Pedro Huggins
830	0	Void * Void
831	5300	550.00 * Sun Electric
832	6710	130.00 * Pedro Huggins
833	6250	13.49 * WAPA
834	6710	200.00 * Roberto Rivera
835	6690	343.92 * Larry Motta
836	5300	135.00 * Ocean Systems
837	6150	✓ 84.83 * Viteleco
838	0	Void * Void
839	6710	200.00 * Roberto Rivera
840	6710	55.00 * Pedro Huggins
841	6690	326.75 * Larry Motta
842	6650	1,052.23 Gross Receipts Tax - Sept. 1996
843	6710	✓ 25.00 Pedro Huggins
844	6150	✓ 208.93 STSJ Telephone

19,780.29

Virgin Islands Community Bank
 Account #182-600135
 Tenant Account

G/L #1058

AJE #2
November 1996

Check #	G/L Acct. #	Disbursements
845	6710	200.00 * Roberto Rivera
846	6710	320.56 * Larry Motta
847	5300	32.50 * Tropical Supply
848	6710	150.00 * Pedro Huggins
849	5300	285.00 * Sun Electric
850	6250	969.55 * WAPA
851	6250	423.60 * WAPA
852	2635	2,830.00 * Estate Carlton Home Owners
853	2635	2,830.00 * Estate Carlton Home Owners
854	6710	200.00 * Roberto Rivera
855	6250	13.49 * WAPA
856	5300	1,900.00 * Rudy Caines
857	6710	300.00 * Larry Motta
858	6710	200.00 * Roberto Rivera
859	6710	300.00 * Larry Motta
860	6150	218.55 STSJ Telephone
861	6710	350.00 * Norman Williams
862	5300	703.00 * General Purpose Electric
863	6710	200.00 * Roberto Rivera
864	6710	300.00 * Larry Motta
865	5300	90.00 Ocean Systems
866	6710	200.00 Roberto Rivera
867	6150	40.00 Vitelco
868	6710	305.49 Larry Motta

| 13,361.74 | 1058

072-2031
 FY 014976

December 1996		
Check #	G/L Acct. #	Disbursements
774		415.00 Joseph Greenway - 08/02/96
869		1,000.00 * Plaza Extra
870		1,215.26 * VIBIR - Gross Receipts
871		572.07 * WAPA
872		200.00 * Roberto Rivera
873		178.75 Sonny's Refridgeration
874		300.00 * Larry Motta
875		2,300.00 * Rudy Caines
876		1,148.86 * WAPA
877		34.10 * Ferst Office Supplies
878		200.00 * Roberto Rivera
879		300.00 * Larry Motta
880		13.49 * WAPA
881		11.65 * Sprint
882		156.00 * American Express
883		200.00 * Roberto Rivera
884		300.00 * Larry Motta
885		300.00 * James Estridge
886		200.00 * STX Gas
887		432.00 * Lancing Charles
888		291.00 General Purpose Electric
889		200.00 Roberto Rivera
890		90.00 Ocean Systems

(9,643.18)

EMPLOYER IDENTIFICATION NUMBER (EIN)
660391237

SOCIAL SECURITY NUMBER (SSN)

CURRENT MONTH April

1999

(Use for filing receipts of more than \$120,000 per year)

Serial # (FOR INTERNAL USE ONLY) 08684

- 1.) Gross Receipt (choose either cash or accrual)
- 2.) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)
- 3.) Taxable Receipts (line 1 minus line 2)
- 4.) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
- 5.) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
- 6.) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
- 7.) (minus) Credits (refunds, prior payments, or withheld amounts)
- 8.) Total Amount Due (add lines 4, 5, 6, minus line 7)

129,034.39
0
29,034.39
1,161.38
0
0
0
1,161.38

INDICATE FIRM TYPE:
 SOLE PROP
 PARTNERSHIP
 CORPORATION

RECEIVED WITH REMITTANCE
PROFESS & ACCT BRANCH

9) Indicate principal business activity code:

PLAZA EXTRA
UNITED SHOPPING PLAZA ST. CROIX
P.O. BOX 763 C*STED
ST. CROIX 00821

10) Please indicate reason for exemption taken on line 2 above: 6512
NO JUN 1 1999

Telephone #: 770-6240 VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE ST. CROIX

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 63, VC SECTIONS 42 & 43.

PRINT NAME: Thomas W. Luff

TITLE: Property Manager
(PRESIDENT, OWNER, ETC.)

SIGNATURE: Thomas W. Luff

DATE: 5/30/99

\$ 1,161.38

Form 720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN) 660391237
SOCIAL SECURITY NUMBER (SSN)

GROSS RECEIPT MONTHLY TAX RETURN
CURRENT MONTH: June **1999**

Serial # (FOR INTERNAL USE ONLY) 08684

1) Gross Receipt (choose either cash or accrual)

2) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)

3) Taxable Receipts (line 1 minus line 2)

4) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)

5) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)

6) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)

7) (minus) Credits (refunds, prior payments, or withheld amounts)

8) Total Amount Due (add lines 4, 5, 6, minus line 7)

9) Indicate principal business activity code:
PLAZA EXTRA
UNITED SHOPPING PLAZA ST. CROIX
P.O. BOX 763 C-STED
00821

10) Please indicate reason for exemption taken on line 2 above: JUN 30 1999

PRINT NAME: Thomas W Luff TITLE: Property Mgr
SIGNATURE: Thomas W Luff DATE: 6/30/99

RECEIVED WITH MEMORANDUM
PROCESS & ADIT BRANCH

*Refused
by Amended
filing*

UNITED CORPORATION-TENANTS ACCOUNT
UNITED SHOPPING PLAZA
TEL (808) 778-8240
PO BOX 763
CHRISTIANSTED, V I 00821-0763

1617
101-871/216

PAY TO THE ORDER OF: Govt. of V.I. Internal Revenue Bureau DATE: 6/29/99
Twelve Hundred Eighty five and 42/100 \$ 1285.42
DOLLARS

VICB
Virgin Islands Commercial Bank
St. John, V.I.

FOR: [Signature]

Form 720 VI. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
GROSS RECEIPT MONTHLY TAX RETURN

TAXPAYER'S TAXPAYER IDENTIFICATION NUMBER (TIN) 786899
SOCIAL SECURITY NUMBER (SSN) _____ CURRENT MONTH June **1999**

Serial # (FOR INTERNAL USE ONLY) 08684

1) Gross Receipt (choose either cash or accrual)
2) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fishermen, lottery commissions, affordable housing, reverse osmosis, etc...)
3) Taxable Receipt (line 1 minus line 2)
4) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
5) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
6) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
7) (minus) Credits (refunds, prior payments, or withheld amounts)
8) Total Amount Due (add lines 4, 5, 6, minus line 7)

9) Indicate principal business activity code:

PLAZA EXTRA
UNITED SHOPPING PLAZA ST. CROIX
P.O. BOX 763 C'STCD
ST. CROIX 00821 Telephone #: _____

10) Please indicate reason for exemption taken on line 2 above: _____

INDICATE FIRM TYPE:
 SOLE PROP.
 PARTNERSHIP
 CORPORATION

PRINT NAME: Thomas W Luff TITLE: Property Mgr
SIGNATURE: Thomas W Luff DATE: 6/30/99

Class for filers receivable for more than \$12,000 per year.

\$32,135.42
N/A
33,135.42
1,285.42
1,285.42

UNITED CORPORATION-TENANTS ACCOUNT 1617
UNITED SHOPPING PLAZA
TEL: (809) 778-6240 101-671/216
PO BOX 763
CHRISTIANSTED, V I 00821-0763

PAY TO THE ORDER OF Govt of V.I. Tax and Revenue Bureau DATE 6/29/99
Twelve Hundred Eighty five and 42/100 \$ 1285.42
DOLLARS

FOR _____

1100161711 150216067131 182000135

Form 720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 CROSS RECEIPT MONTHLY TAX RETURN
 CURRENT MONTH: June 1999

*Released
 by Amended
 Index*

- Serial # (FOR INTERNAL USE ONLY) 08684
- 1) Gross Receipt (choose either cash or accrual)
 - 2) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)
 - 3) Taxable Receipts (line 1 minus line 2)
 - 4) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
 - 5) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
 - 6) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
 - 7) (minus) Credits (refunds, prior payments, or withheld amounts)
 - 8) Total Amount Due (add lines 4, 5, 6, minus line 7)

\$24,075.00
0.00
24,075.00
1,395.83
0.00
0.00
0.00
\$1,395.83

INDICATE FIRM TYPE:
 SOLE PROP.
 PARTNERSHIP
 CORPORATION

9) Indicate principal business activity code: 8000 **OPERATED WITH REMITTANCE**
 PLAZA EXTRA
 UNITED SHOPPING PLAZA ST. CROIX
 P.O. BOX 763 STED
 ST. CROIX 00821 Telephone #: 778-6240

10) Please indicate reason for exemption taken on line 2 above: 380 as
JUL 30 1999
1325
1640

PRINT NAME: Thomas W. Luff TITLE: Property Manager
 SIGNATURE: Thomas W. Luff DATE: 7/30/99

Adjusted Book Balance	98,781.66
Delta:	0.00
Gross Receipts Tax	1,395.83 ✓
Due Friday - 07/30/99	

*ATTN:
 Luff*

UNITED CORPORATION-TENANTS ACCOUNT

1674

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

101-671/216

PAY TO THE ORDER OF

DATE 8/27/99

Govt of the V.I. Bureau of Int. Rev. \$ 1,605.26
Sixteen Hundred and five and 26/100

DOLLARS



Virgin Islands Community Bank
Incorporated in the Virgin Islands

FOR Gross Receipts - July '99

⑈001674⑈ ⑈021606713⑈ 18 2⑈ 600135⑈

Form 720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
GROSS RECEIPT MONTHLY TAX RETURN

EMPLOYER IDENTIFICATION NUMBER (EIN) 680371237
SOCIAL SECURITY NUMBER (SSN) _____
CURRENT MONTH July **1999**

Serial # (FOR INTERNAL USE ONLY) 08684

\$ <u>49,134.50</u>	INDICATE FIRM TYPE:
<u>0</u>	<input type="checkbox"/> SOLE PROP.
<u>49,134.50</u>	<input type="checkbox"/> PARTNERSHIP
<u>1,605.26</u>	<input checked="" type="checkbox"/> CORPORATION
<u>0</u>	
<u>1,605.26</u>	

1.) Gross Receipt (choose either cash or accrual)
2.) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)
3.) Taxable Receipts (line 1 minus line 2)
4.) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
5.) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
6.) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
7.) (minus) Credits (refunds, prior payments, or withheld amounts)
8.) Total Amount Due (add lines 4, 5, 6, minus line 7)

9.) Indicate principal business activity code:
PLAZA EXTRA
UNITED SHOPPING PLAZA ST. CROIX
P.O. BOX 763 C*STED
ST. CROIX 00821 Telephone #: 778-6240

10.) Please indicate reason for exemption taken on line 2 above: _____

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VC SECTIONS 42 & 43.

PRINT NAME: Thomas W Luff TITLE: Property Mgr
SIGNATURE: Thomas W Luff DATE: 8/27/99

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
 TEL (809) 778-6240
 PO BOX 763
 CHRISTIANSTED, V I 00821-0763

1714

101-671/216

PAY TO THE ORDER OF

DATE 9-30-99

Govt of V.I. Bureau of Int. Revenue \$ 1470.76
Fourteen Hundred Seventy and 76/100 DOLLARS

VI CB
 Virgin Islands Community Bank
 Christiansted Branch
 St. Croix, U.S.V.I.

FOR Exp. Receipts Aug '99

[Signature]

⑈001714⑈ ⑆021606713⑆ 182⑈600135⑈

720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
 GROSS RECEIPT MONTHLY TAX RETURN

1999

CURRENT MONTH August

OTHER IDENTIFICATION NUMBER (EIN) 60391237
 SECURITY NUMBER (SSN) _____

Serial # (FOR INTERNAL USE ONLY) 08686

1.) Gross Receipt (choose either cash or accrual)
 2.) (minus) EXEMPTION (see standard \$5,000-IDG, Refresher, lottery commissions, affordable housing, reverse osmosis, etc...)
 3.) Taxable Receipts (line 1 minus line 2) \$ 36769

4.) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
 5.) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
 6.) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
 7.) (minus) Credits (refunds, prior payments, or withheld amounts)
 8.) Total Amount Due (add lines 4, 5, 6, minus line 7) 1470.76

9.) Indicate principal business activity code: 5790
 PLAZA EXTRA
 UNITED SHOPPING PLAZA ST. CROIX
 P.O. BOX 763 C*STED
 St. Croix, VI 00821

10) Please indicate reason for exemption (taken on line 2 above): n/a

Telephone #: 778-6290

PRINT NAME: Thomas W. Loff TITLE: Property Manager
 SIGNATURE: *[Signature]* DATE: 9-30-99

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 63, V.I. SECTIONS 2121 & 2122.

Form 720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE
GROSS RECEIPT MONTHLY TAX RETURN

EMPLOYER IDENTIFICATION NUMBER (EIN) 660391237
 SOCIAL SECURITY NUMBER (SSN) _____ CURRENT MONTH NOV **1999**

Serial #: (FOR INTERNAL USE ONLY) 08684

1) Gross Receipt (choose either cash or accrual)
 2) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fishermen, lottery commissions, affordable housing, reverse osmosis, etc...)
 3) Taxable Receipts (line 1 minus line 2)
 4) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
 5) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
 6) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
 7) (minus) Credits (refunds, prior payments, or withheld amounts)
 8) Total Amount Due (add lines 4, 5, 6, minus line 7)

30,600.94
0
30,600.94
1,224.04
0
8
1,224.04

INDICATE FIRM TYPE:
 SOLE PROP.
 PARTNERSHIP
 CORPORATION

9) Indicate principal business activity code: 6512
(see reverse)

10) Please indicate reason for exemption taken on line 2 above: _____

PLAZA EXTRA
 UNITED SHOPPING PLAZA ST. CROIX
 P.O. BOX 763 C*STED
 ST. CROIX 00821 Telephone #: 647 778-6240 x25

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 V.I.C. SECTIONS 42 & 43.7.

PRINT NAME: Thomas W. Luff TITLE: Property Manager
 SIGNATURE: Thomas W. Luff DATE: 12/29/99
(PRESIDENT, OWNER, ETC.)

UNITED CORPORATION-TENANTS ACCOUNT
 UNITED SHOPPING PLAZA
 TEL (809) 778-6240
 PO BOX 763
 CHRISTIANSTED, V I 00821-0763

1812
 101-671/216

PAY TO THE ORDER OF: Govt of VI Internal Revenue Bureau DATE 12/29/99
Twelve Hundred Twenty four and 04/100 \$ 1,224.04
 DOLLARS Security Features: Please see back

VICB
 Virgin Islands Community Bank
 Christiansted Branch
 St. Croix, U.S.V.I.

FOR November Gross Receipts

⑆001812⑆ ⑆021606713⑆ 182⑆00135⑆

January Rent Reconciliation

8b +

United Shopping Plaza

January Rents

DEPOSITS

07-Jan-00

Beeper	835.00
Phillip	475.00
Island Phones	244.93
Exposse	500.00
Low-a-chea	400.00
Alcore	730.00
Jp Sales	2,340.00
Island Finance	2,406.25
47th st	781.25
<hr/>	
	8,712.43

11-Jan-00

SUI	1,350.00
LEI #8	675.00
USW 8528	1,195.00
Gill	600.00
Best	7,000.00
Naty	238.72
Naty	175.00
Peoples Laundr	2,650.00
Desha Marie	500.00
Desha Marie	350.00
Roper	250.00
<hr/>	
	14,983.72

14-Jan-00

Mid Island Men:	1,188.87
Ranger Am	700.00
Urbina	525.00
New Plaza Café	1,500.00
Garcia	729.00
Alonso	1,250.00
<hr/>	
	5,872.87

19-Jan-00

Best	5,000.00
Gill	600.00
Sewtech	200.00
Zenon	782.50
<hr/>	
	6,582.50

20-Jan-00

Dhillon	950.00
<hr/>	
	950.00

24-Jan-00

JP Sales	1,000.00
<hr/>	
	1,000.00

28-Jan

Nguyen	575.00
<hr/>	
	575.00

31-Jan

Sewtech	200.00
Gill	600.00
Laundromat to replace bad ck	2,650.00
<hr/>	
	3,450.00

Balance Reports					
	Total Deposits	Database	Difference	A/R sheet	Diff
Deposits	\$ 42,124.32	\$ 44,780.67		\$ 44,780.67	
Island Phonee	\$ (244.93)				
JP cash	\$ 1,340.00				
Naty cash	\$ 211.28				
Boos cash	\$ 2,000.00				
Best Credit	\$ 2,000.00				
landromet che	\$ (2,650.00)				
			39,229.39		
			x .04 =	1,569.18	
	\$ 44,780.67	\$ 44,780.67	\$ -	\$ 44,780.67	\$ 0.00

Gross Receipts \$ 39,474.32
Tax 1,578.97

pd 1637.16 on 12/32
1.04
1684.97 ✓
Should have 1569.18
been 39,229.18

stated income to BPR

\$ 40,929.55 ?? where'd this come from
67.98 over Pmt

Form 720 V.I. GOVERNMENT OF THE VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)
 660391237
 SOCIAL SECURITY NUMBER (SSN)

GROSS RECEIPT MONTHLY TAX RETURN
 CURRENT MONTH December

1999

Use for filing receipts of more than \$120,000 per year.

Serial # (FOR INTERNAL USE ONLY) 08684

- 1) Gross Receipt (choose either cash or accrual)
- 2) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)
- 3) Taxable Receipts (line 1 minus line 2)
- 4) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
- 5) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
- 6) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
- 7) (minus) Credits (refunds, prior payments, or withheld amounts)
- 8) Total Amount Due (add lines 4, 5, 6; minus line 7)

\$40,929.05
- 0 -
40,929.05
1,637.16
- 0 -
- 0 -
- 0 -
1,637.16

INDICATE FIRM TYPE:
 SOLE PROP.
 PARTNERSHIP
 CORPORATION

9) Indicate principal business activity code: 6512
 (see reverse)
 UNITED CORPORATION
 P.O. BOX 763
 CHRISTIANSTED ST. CROIX 00821

10) Please indicate reason for exemption taken on line 2 above: N/A
 Telephone #: 778-6240


I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLES 33, V.C. SECTIONS 42 & 43.

PRINT NAME: THOMAS W. LUFF

TITLE: Property Manager
 (PRESIDENT, OWNER, ETC.)

SIGNATURE: Thomas W. Luff

DATE: 31 Jan 2000

UNITED CORPORATION-TENANTS ACCOUNT UNITED SHOPPING PLAZA TEL (609) 778-6240 PO BOX 763 CHRISTIANSTED, V I 00821-0763		1840 101-671/216
PAY TO THE ORDER OF <u>Cmt. of Virgin Islands, Internal Revenue Bureau</u>		DATE <u>31 Jan 2000</u>
\$ <u>1637.16</u>		
Sixteen Hundred Thirty-Seven and 16/100		DOLLARS
 Virgin Islands Community Bank Christiansted Branch St. Croix, U.S.V.I.		
FOR <u>Dec. 1999 Gross Receipt Tax</u>		
@001840 @021606713 18200135		

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
 TEL (809) 778-6240
 PO BOX 763
 CHRISTIANSTED, V I 00821-0763

1869

101-871/216

PAY TO THE ORDER OF

V.I. Grover & next, Internal Revenue Bureau
Thirteen Hundred, Twenty-Two and 54/100

DATE *2/28/00*

\$ *1322.54*

DOLLARS Security features to help protect your check are on back.



FOR

Jan 2000 Gross Payroll

⑈001869⑈ ⑆021606713⑆ 182⑈600135⑈

Form 720 V.I.

GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)
560391237

GROSS RECEIPT MONTHLY TAX RETURN

SOCIAL SECURITY NUMBER (SSN)

CURRENT MONTH *January*

1999 *2000*

Use for filing receipts of more than \$120,000 per year.

Serial # (FOR INTERNAL USE ONLY) *09696*

- 1.) Gross Receipt (choose either cash or accrual)
- 2.) (minus) EXEMPTION (ex. standard \$5,000, IDC, Fisherman, lottery commissions, affordable housing, reverse osmosis, etc...)
- 3.) Taxable Receipts (line 1 minus line 2)
- 4.) Tax Due (Multiply line 3 by the tax rate of .04 or 4%)
- 5.) Penalty (If payment is late multiply line 4 by the tax rate of .05 or 5% per month)
- 6.) Interest (If payment is late multiply line 4 by the tax rate of .01 or 1% per month)
- 7.) (minus) Credits (refunds, prior payments, or withheld amounts)
- 8.) Total Amount Due (add lines 4, 5, 6, minus line 7)

<i>33,663.51</i>
<i>20-</i>
<i>33,663.51</i>
<i>1,322.54</i>
<i>20-</i>
<i>20-</i>
<i>1,322.54</i>

INDICATE FIRM TYPE:
 SOLE PROP
 PARTNERSHIP
 CORPORATION

9) Indicate principal business activity code: *6512*

UNITED CORPORATION
 P.O. BOX 763
 CHRISTIANSTED, ST. CROIX 00821

10) Please indicate reason for exemption taken on line 2 above: *N/A*

Telephone #: *778-6240 x22*

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 V.I.C. SECTIONS 42 & 43.

PRINT NAME: *THOMAS W. LUFF*

TITLE: *Property Mgr*
(PRESIDENT, OWNER, ETC.)

SIGNATURE: *Thomas Luff*

DATE: *2/28/00*

UNITED CORPORATION-TENANTS ACCOUNT

1935

UNITED SHOPPING PLAZA
TEL (809) 778-8240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

101-871218

PAY TO THE ORDER OF

VI Govt - Internal Revenue Dept

DATE 4/28/00

\$ 1,298.78

Twelve hundred ninety eight & 78/100

DOLLARS



Virgin Islands Community Bank
Chartered in the
U.S.A. U.S.V.I.

[Signature]

FOR

⑈001935⑈ ⑆021606713⑆ 182⑈600135⑈

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN

GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

6 6 0 3 9 1 2 3 7

CURRENT MONTH

03

2000

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

0 8 6 8 4

1.) GROSS RECEIPTS	1.	3 2 4 6 9.42
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc...)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE	3.	
	(SEE REVERSE)	
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	3 2 4 6 9.42
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	1 2 9 8.78
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	1 2 9 8.78

RECEIVED WITH REMITTANCE
PROCESS & ACCT DEPT

APR 28 2000

VIRGIN ISLANDS BUREAU OF
INTERNAL REVENUE ST. CROIX

Name
UNITED, CORPORATION

10. Indicate Principal Business Activity Code:

6 5 1 2

(SEE REVERSE)

Mailing Address
P.O. BOX 763

City
CSTED, ST. CROIX

State
VI

Zip Code
00821

11. Telephone #:

7 7 8 - 6 2 4 0

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LUFF

TITLE: PROPERTY MGR
(PRESIDENT, OWNER, ETC.)

SIGNATURE: *Thomas W. Luff*

DATE: 4/28/00

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

2000

EMPLOYER IDENTIFICATION NUMBER (EIN) **6 8 0 3 8 1 2 3 7** CURRENT MONTH **0 3**

SOCIAL SECURITY NUMBER (SSN) _____ Indicate Firm Type:
Sole Proprietor _____
Partnership _____
 Corporation

Accounting Method:
 CASH
ACCRUAL _____

1.) GROSS RECEIPTS	1.	3 1 2 9 2.7 4
2.) (minus) EXEMPTIONS (incl. standard \$2,000, Fisherman, ICC, hobby contributions, affordable housing, reverse mortgage, etc.)	2.	0.0 0
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE	3.	<u>NA</u> (SEE REVERSE)
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	3 1 2 9 2.7 4
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	1 2 5 1.7 1
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.0 0
7.) INTEREST (if payment is late multiply line 6 by .01 or 1%)	7.	0.0 0
8.) (minus) CREDITS (prepayments, prior payments or withhold amounts)	8.	0.0 0
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	1 2 5 1.7 1

Name
UNITED CORPORATION

10. Indicate Principal Business Activity Code:

6 5 1 2
(SEE REVERSE)

D/B/A

11. Telephone #:

7 7 8 - 6 2 4 0

Mailing Address
PO BOX 763

CITY
CHRISTIANSTED

State
VI

Zip Code
00821

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: **THOMAS W LUFF**

TITLE: **Property Manager**
(PRESIDENT, OWNER, ETC.)

SIGNATURE: *Thomas W Luff*

DATE: **4/28/00**

1935 151-01234

DATE **4/28/00** DOLLARS **\$ 1,298.78**

UNITED CORPORATION-TENANTS ACCOUNT
UNITED SHOPPING PLAZA
TEL. 369-774-8240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

Pay to the order of **VI Govt - Internal Revenue Dept**

Thomas W Luff 78/100

FOR *[Signature]*

West Merc Company Bank
A Division of

1510095# 02180672# 182# 2909120# #5E6100#

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL. (809) 778-8240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

1981

101-671/216

PAY TO THE ORDER OF

Grant of 1/ Bureau of Prisons
Nine Hundred Seventy and 58/100

DATE *6/30/00*
\$ *970.58*

DOLLARS



Virgin Islands Commercial Bank
Christianssted Branch
St. John, U.S.V.I.

FOR *Gross Receipt May 00*

⑆001981⑆ ⑆021606713⑆ 182⑆600135⑆

OVERLAND STYLE 80
UNITED CORPORATION-TENANTS ACCOUNT
UNITED SHOPPING PLAZA
TEL (809) 779-8240
PO BOX 763
CHRISTIANSSTED, VI 00821-0763

2010

101-871/216

PAY TO THE ORDER OF VI Bureau of Internal Revenue

DATE 7/28/00

\$ 1344.36

Hundred and forty-four and 36/100

DOLLARS




Virgin Islands Community Bank
Christianssted, VI
St. Oed, U.S.V.I.

FOR Cross Receipt - June

⑆002010⑆ ⑆021606713⑆ 182⑆600135⑆

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN

GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

66 0 39 1 23 7

CURRENT MONTH

07

2000

SOCIAL SECURITY NUMBER (SSN)

N/A

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

1.) GROSS RECEIPTS 1.

336 09.52

2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse census, etc...) 2.

000.00

3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE 3.
(SEE REVERSE)

N/A

4.) TAXABLE RECEIPTS (line 1 minus line 2) 4.

RECEIVED WITH REMITTANCE
PROCESS & ACCT. BRANCH
CR 2010

336 09.52

5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%) 5.

134 4.38

6.) PENALTY (if payment is late multiply line 5 by .05 or 5%) 6.

1111 31 0000

0.00

7.) INTEREST (if payment is late multiply line 5 by .01 or 1%) 7.

VIRGIN ISLANDS BUREAU OF
INTERNAL REVENUE, ST. CROIX

0.00

8.) (minus) CREDITS (refunds, prior payments or withheld amounts) 8.

0.00

9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8) 9.

344.36

Name UNITED SHOPPING
PLAZA

10. Indicate Principal Business Activity Code:

6512
(SEE REVERSE)

D/B/A

11. Telephone #:

Mailing Address

PO BOX 763

City

CHRISTIANSTED

State

VI 00821

Zip Code

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME:

THOMAS W. LUFF

TITLE:

PROPERTY MGR.
(PRESIDENT, OWNER, ETC.)

SIGNATURE:

Thomas W. Luff

DATE:

7/30/00

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 763
CHRISTIANSSTED, VI 00821-0763

2031

101-671216

PAY TO THE ORDER OF V.I. Govt. Federal Reserve Purchase DATE Jan 29 1980

Eight Hundred Sixteen and 79/100 \$ 816.79

Virgin Islands Commercial Bank
Christianssted Branch
St. John, U.S.V.I.

DOLLARS

FOR Garrett Receipts See CO

⑆00203⑆ ⑆021605713⑆ 182⑆800135⑆

[Signature]

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

660391237

CURRENT MONTH

07

2000

SOCIAL SECURITY NUMBER (SSN)

N/A

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCURAL

1.) GROSS RECEIPTS 1.

20419.67

2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, 2.
IDC, lottery commissions, affordable housing, reverse osmosis, etc...)

0.00

3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE 3.
(SEE REVERSE)

N/A

4.) TAXABLE RECEIPTS (line 1 minus line 2) 4.

20419.67

5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%) 5.

816.79

6.) PENALTY (if payment is late multiply line 5 by .05 or 5%) 6.

0.00

7.) INTEREST (if payment is late multiply line 5 by .01 or 1%) 7.

0.00

8.) (minus) CREDITS (refunds, prior payments or withheld amounts) 8.

0.00

9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8) 9.

816.79

Name UNITED CORPORATION

10. Indicate Principal Business Activity Code:

D/B/A

6512

(SEE REVERSE)

UNITED SHOPPING PLAZA
PO BOX 763, 4C & D SION FARM
CHRISTIANSTED, VI 00821

Mailing Address

11. Telephone #:

City

State

Zip Code

778 6240 x 29

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LOEF

TITLE: PROP. MGR.
(PRESIDENT, OWNER, ETC.)

SIGNATURE: Thomas W. Loef

DATE: 7/30/00

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 783
CHRISTIANSTED, VI 00821-0763

2048

101-671/216

PAY TO THE ORDER OF

VT GOVT - Internal Per Bureau

DATE 9/30/00

\$ 1,628.66

Sixteen Hundred Twenty Eight and 66/100

DOLLARS

Security Features
Check on back



Virgin Islands Community Bank
Christianssted Island
St. Croix, U.S.V.I.

FOR Aug Gross Rempt

⑈002018⑈ ⑆021606213⑆ 182⑈600135⑈

FY 015020

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 783
CHRISTIANSTED, VI 00821-0783

2048

101-671/216

PAY
TO THE
ORDER OF

VT GOVT - Internal Per Bureau

DATE *9/30/00*

\$ *1,628.60*

Sixteen Hundred Twenty Eight and 00/100

DOLLARS



Virgin Islands Community Bank
Christiansted Branch
St. Croix, U.S.V.I.

FOR *Aug Gross Pmt*

⑈002048⑈ ⑆021606713⑆ 182⑈600135⑈

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

660391287

CURRENT MONTH

08

2000

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor

Partnership

X Corporation

Accounting Method:

X CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

Table with 2 columns: Description and Amount. Rows include: 1. GROSS RECEIPTS (40716.49), 2. (minus) EXEMPTIONS (0.00), 3. PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE (N/A), 4. TAXABLE RECEIPTS (40716.49), 5. TAX DUE (1628.66), 6. PENALTY (0.00), 7. INTEREST (0.00), 8. (minus) CREDITS (0.00), 9. TOTAL AMOUNT DUE (1628.66). Includes a stamp: RECEIVED WITH REMITTANCE PROCESS & ACCT. BRANCH OCT 27 2000.

Name UNITED SHOPPING PLAZA

10. Indicate Principal Business Activity Code:

D/B/A

6512 (SEE REVERSE)

Mailing Address

PO BOX 763
CHRISTIANSTED

State VI

Zip Code 00821

11. Telephone #:

778-6240

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LUFF

TITLE: Property Manager (PRESIDENT, OWNER, ETC.)

SIGNATURE: [Handwritten Signature]

DATE: 10/2/00

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 783
CHRISTIANSTED, VI 00821-0763

2083

101-671/216

DATE 10/30/80

PAY TO THE ORDER OF

VI Govt Internal Revenue Dept

\$ 1,097.58

One Thousand Nine Ty Seven and 58/100

DOLLARS

Security features included. Deposit on back.



Virgin Islands Community Bank
Chartered Branch
St. John, U.S.V.I.

FOR

Gross Receipts - September

[Signature]

⑈002083⑈ ⑆021606713⑆ 182⑈600135⑈

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
 GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

660391277

CURRENT MONTH

09

2000

SOCIAL SECURITY NUMBER (SSN)

N/A

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

1.) GROSS RECEIPTS	1.	27439.48
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse annuity, etc.)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE (SEE REVERSE)	3.	N/A.
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	27439.48
5.) TAX DUE (multiply line 4 by the tax rate of .05 or 4%)	5.	1397.58
6.) PENALTY (if payment is late multiply line 5 by .05 or 6%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	1397.58

Name

UNITED ISRA

RECEIVED WITH REMITTANCE PROCESS & ACCT. BRANCH

Indicate Principal Business Activity Code

D/B/A

OCT 27 2000

6312 (SEE REVERSE)

UNITED SHOPPING PLAZA

PO BOX 763, AC & D SIGN FARM CHRISTIANSTED, VI 00621

VIRGIN ISLANDS BUREAU OF

INTERNAL REVENUE DISTRICT, ST. JOHN

Mailing Address

City

State

Zip Code

778-6240 Telephone #: (SEE REVERSE)

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: Thomas ... Louis

TITLE: PROPERTY MGR.
(PRESIDENT, OWNER, ETC.)

SIGNATURE: Thomas ... Louis

DATE: 30 Oct 2000

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL. (809) 778-8240
P.O. BOX 763

CHRISTIANSSTED, VI 00821-0763

2108

107-871216

PAY TO THE ORDER OF

Govt. of VI - 188

DATE 11/29/60

Sixteen Hundred Twenty and 00/100

\$ 1620.00



Virgin Islands Commercial Bank
St. John, VI

DOLLARS



FOR Cash Receipt Oct 2000

⑆002108⑆ ⑆021506⑆ ⑆13⑆ 182⑆ 600⑆ 135⑆

[Signature]

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

66039.1237

CURRENT MONTH

10

2000

SOCIAL SECURITY NUMBER (SSN)

N/A

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

1.) GROSS RECEIPTS	1.	40,519.87
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc.)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE (SEE REVERSE)	3.	N/A
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	40,519.87
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	1,620.79
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	1,620.79

RECEIVED WITH REMITTANCE
PROCESS & ACCT. BRANCH

NOV 30 2000

VIRGIN ISLANDS BUREAU OF
INTERNAL REVENUE C/STED, ST. CROIX

Name: UNITED CORP

10. Indicate Principal Business

Activity Code:

D/B/A: UNITED SHOPPING PLAZA

6512

(SEE REVERSE)

Mailing Address:

PO BOX 673
CHRISTIANSTED State: VI Zip Code: 00821

11. Telephone #:

3407786240

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W LUFF

TITLE: Property MANAGER
(PRESIDENT, OWNER, ETC.)

SIGNATURE: *Thomas W Luff*

DATE: NOV 30 2000

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
 TEL: (800) 778-8240
 PO BOX 763
 CHRISTIANSTED, VI 00821-0763

2137

101-871/218

PAY TO THE ORDER OF

VI GOV Internal Revenue Bureau

DATE 12/26/00

\$ 1,777.50

Seventeen Hundred, Seventy-Seven and 50/100

DOLLARS



Virgin Islands Community Bank
 Christiansted Branch
 St. Croix, U.S.V.I.

FOR November Gross Receipts TAX

⑈002137⑈ ⑈021606713⑈ 182⑈600135⑈

SERIAL # (FOR INTERNAL USE ONLY)	Partnership	<input checked="" type="checkbox"/> CASH
	<input checked="" type="checkbox"/> Corporation	ACCRUAL
1.) GROSS RECEIPTS 1.		44,437.41
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc...) 2.		0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE (SEE REVERSE) 3.	<u>N/A</u>	
4.) TAXABLE RECEIPTS (line 1 minus line 2) 4.		44,437.41
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%) 5.		1,777.50
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%) 6.		0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%) 7.		0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts) 8.		0.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8) 9.		1,777.50
Name	10. Indicate Principal Business Activity Code:	
D/B/A	6512 (SEE REVERSE)	
UNITED SHOPPING PLAZA PO BOX 763, 4C & D BION FARM CHRISTIANSTED, VI 00821	11. Telephone #:	
Mailing Address	778-6240x29	
City	State	Zip Code
I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43		
PRINT NAME: <u>THOMAS W LUFF</u>	TITLE: <u>PROPERTY MGR.</u> (PRESIDENT, OWNER, ETC.)	
SIGNATURE: <u>Thomas W Luff</u>	DATE: <u>12/26/00</u>	

RECEIVED WITH REMITTANCE
 PROCESS & ACCT. BRANCH
 DEC 28 2000
 VIRGIN ISLANDS DEPT. OF
 INTERNAL REVENUE U.S. DEPT. OF TREASURY

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-8240
PO BOX 783
CHRISTIANSTED, VI 00821-0783

2166

101-571216

DATE

1/30/01

PAY TO THE ORDER OF V. T. LABOR Supply of Christiansted Port.

\$ 1,333.00

DOLLARS



Virgin Islands Commercial Bank
Operated from
St. John, US VI

FOR

660 391237 Silver Receipts 12/2001

⑆002166⑆ ⑆021808713⑆ 182⑆500135⑆

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

660391237

CURRENT MONTH

12

2000

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

1.) GROSS RECEIPTS	1.	33338.78
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc...)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE	3.	
	(SEE REVERSE)	
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	33338.78
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	1333.53
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)		1333.53

Name UNITED CORP

RECEIVED WITH REMITTANCE
PROCESS & ACCT. BRANCH

JAN 30 2001 10. Indicate Principal Business Activity Code:

D/B/A UNITED SHOPPING PLAZA
VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE C'STED, ST. CROIX 6512
(SEE REVERSE)

Mailing Address PO Box 763

11. Telephone #:

City Christavsted State VI Zip Code 00821

778-6240 x29

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LUFF

TITLE: Property Manager
(PRESIDENT OWNER ETC.)

SIGNATURE: Thomas W Luff

DATE: JAN 30 2001

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN

GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN) 660391237

CURRENT MONTH 01

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor Partnership Corporation

ACCRUA

CASH

Accounting Methods:

2000

- 1.) GROSS RECEIPTS
- 2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse demosis, etc...)
- 3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE
- 4.) TAXABLE RECEIPTS (line 1 minus line 2)
- 5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)
- 6.) PENALTY (if payment is late multiply line 5 by the tax rate of .04 or 4%)

FOR JAN 02 Receipts TAX

PAY TO THE ORDER OF

Virgin Islands Internal Revenue Bureau

DOLLARS

\$ 815.04

DATE 2/28/01

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-6240
PO BOX 763
CHRISTIANSTED, VI 00821-0763

2187

101-671/216

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

TITLE: PROPERTY MANAGER

PRINT NAME: THOMAS L. LEE

DATE: 2/28/01

SIGNATURE: Thomas L. Lee

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)

660391237

CURRENT MONTH

01

2000

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

1.) GROSS RECEIPTS	1.	23,369.00
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc...)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE	3.	NA (SEE REVERSE)
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	23,369.00
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	815.04
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	815.04

Name: THOMAS W. LUFF

D/R/A: ...

Mailing Address: P.O. Box 7, CHRISTIANSTADT, VI, Zip Code: 778-6240

10. Indicate Principal Business Activity Code:

11. Telephone #: 778-6240

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LUFF

TITLE: PROPERTY MANAGER (PRESIDENT OWNER, ETC.)

SIGNATURE: Thomas W. Luff

DATE: 2/28/04

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL. (809) 778-8240
P.O. BOX 763
CHRISTIANSSTED, VI 00621-0763

MAD 29 2001

2225

101-671/218

RECEIVED WITH BENEFITS
PROCESSED BY BRANCH

PAY TO THE ORDER OF

Virginia International Revenue Bureau

VIRGINIA INTERNATIONAL REVENUE BUREAU
3729/01

\$ 1,370.89

DOLLARS

VIRB
Virgin Islands Commercial Bank
Christianssted, VI

FOR *Fed 01 Gross Receipts*

⑆002225⑆ ⑆021606713⑆ 18 2⑆ 800135⑆

Form 720 V.I.

(Use for filing receipts of more than \$120,000 per year.) Please Print or Type Clearly

GROSS RECEIPT MONTHLY TAX RETURN
 GOVERNMENT OF THE VIRGIN ISLANDS, BUREAU OF INTERNAL REVENUE

EMPLOYER IDENTIFICATION NUMBER (EIN)
 660391237

CURRENT MONTH
 02

2000

SOCIAL SECURITY NUMBER (SSN)

Indicate Firm Type:

Sole Proprietor

Partnership

Corporation

Accounting Method:

CASH

ACCRUAL

SERIAL # (FOR INTERNAL USE ONLY)

1.) GROSS RECEIPTS	1.	3,4272.17
2.) (minus) EXEMPTIONS (ex. standard \$5,000, Fishermen, ... <small>DC, lottery commissions, affordable housing, reverse osmosis, etc...</small>)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE <small>(SEE REVERSE)</small>	3.	
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	3,4272.17
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	1,370.89
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	5.00
9.) TOTAL AMOUNT DUE (add lines 5, 6, 7 minus line 8)	9.	1,370.00

Name

UNITED CORP

RECEIVED WITH REMITTANCE
 PROCESS & ACCT. FRANCO

Indicate Principal Business

Activity Code:

D/B/A

UNITED SHOPPING PLAZA

MAR 29 2001

0512

(SEE REVERSE)

Mailing Address

PO Box 763

VIRGIN ISLANDS BUREAU OF
 INTERNAL REVENUE C/STED, ST. CROIX

11. Telephone #:

City

CHRISTIANSTED

State

VI

Zip Code

00821

778 6240

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43

PRINT NAME: THOMAS W. LUFF

TITLE: PROPERTY MANAGER
(PRESIDENT, OWNER, ETC.)

SIGNATURE: *Thomas W. Luff*

DATE: 3/29/01

Government of the U.S. Virgin Islands
BUREAU OF INTERNAL REVENUE

Gross Receipt Monthly Tax Return
(Use for filing receipts of more than \$120,000 per year.)

Employer Identification Number (EIN)
6 6 0 3 9 1 2 3 7

Please Print or Type Clearly

CURRENT MONTH

0 3

Social Security Number (SSN#)

Indicate Firm Type:

Sole Proprietor

Accor

Partnership

Corporation

SERIAL # (FOR INTERNAL USE ONLY)

0 8 5 8 4

1.) GROSS RECEIPTS

2.) (MINUS) EXEMPTION (ex. standard \$5,000, Fish commissions, affordable housing, reverse osmosis, ...)

3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2

4.) TAXABLE RECEIPTS

5.) TAX DUE (multiple)

6.) PENALTY

7.) INTEREST

8.)

9.)

Name

U N I

D/B/A

U N I T E D

Mailing Address

P O B O X 7 6

City

C H R I S T I A N S T E D

State

V I

Zip Code

0 0 8 2 1

10.) Indicate Principal Business

Activity Code:

6 5 1 2

(SEE REVERSE)

12.) Telephone #:

7 7 5 6 2 4 0

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43.

Print Name: Thomas W. Cuff

Title: PROPERTY MGR.
(PRESIDENT, OWNER, ETC.)

Signature: Thomas W. Cuff

Date: 4/30/01

Check stub for \$1968.46 dated 4/26/01. Payable to United Corporation - Tenants Account. Includes routing slip information and MICR line.

Summary of tax amounts:
5.25
168.46
0.00
0.00
0.00
1968.46

© HARLAND STYRE INC.

UNITED CORPORATION-TENANTS ACCOUNT
UNITED SHOPPING PLAZA
TEL (809) 778-8240
PO BOX 763
CHRISTIANSSTED, VI 00821-0763

2320

101-671/216

DATE 5/30/01

PAY TO THE ORDER OF VI SALT - TURTLEVA RENEUE BUE. \$ 925.85

Virgin Bank Corporation
54 Great U.S.V.I.



DOLLARS



FOR Cross Receipts

⑆002320⑆ ⑆021608713⑆ 182⑆600135⑆

[Handwritten signature]

FORM 720 V.I.

(Rev. 11/3/99)

Government of the U.S. Virgin Islands
BUREAU OF INTERNAL REVENUE

Gross Receipt Monthly Tax Return

(Use for filing receipts of more than \$120,000 per year.)

Employer Identification Number (EIN)

66 0391237

Please Print or Type Clearly

CURRENT MONTH

04

Social Security Number (SSN#)

Indicate Firm Type:

Sole Proprietor

Accounting Method:

Partnership

X CASH

SERIAL # (FOR INTERNAL USE ONLY)

08684

X Corporation

ACCRUAL

2001

1.) GROSS RECEIPTS	1.	23146.21
2.) (MINUS) EXEMPTION (ex. standard \$5,000, Fishermen, IDC, lottery commissions, affordable housing, reverse osmosis, etc.)	2.	0.00
3.) PLEASE INDICATE REASON FOR EXEMPTION TAKEN ON LINE 2 ABOVE (SEE REVERSE)	3.	N/A
4.) TAXABLE RECEIPTS (line 1 minus line 2)	4.	23146.21
5.) TAX DUE (multiply line 4 by the tax rate of .04 or 4%)	5.	925.85
6.) PENALTY (if payment is late multiply line 5 by .05 or 5%)	6.	0.00
7.) INTEREST (if payment is late multiply line 5 by .01 or 1%)	7.	0.00
8.) (minus) CREDITS (refunds, prior payments or withheld amounts)	8.	0.00
9.) TOTAL AMOUNT DUE (add line 5, 6, 7 minus line 8)	9.	925.85

RECEIVED WITH RETURN TO
PROCESS & PAY THROUGH
MAY 30 2001
VIRGIN ISLANDS BUREAU OF
INTERNAL REVENUE C/STED. ST. CROIX

Name

UNITED CORPORATION

D/B/A

UNITED SHOPPING PLAZA

Mailing Address

PO BOX 763

City

CHRISTIANSTED

State

VI

Zip Code

00821

10.) Indicate Principal Business

Activity Code:

6512

(SEE REVERSE)

12.) Telephone #:

340 778 6240

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43.

Print Name: THOMAS W LUFF

Title: Proprietor/Manager
(PRESIDENT, OWNER, ETC.)

Signature: [Handwritten Signature]

Date: 5/30/01

FORM 720 V.I.

(Rev. 11/3/99)

Government of the U.S. Virgin Islands
BUREAU OF INTERNAL REVENUE

Gross Receipt Monthly Tax Return

(Use for filing returns of more than \$120,000 per year.)

Employer Identification Number (EIN)

5 5 0 3 9 1 2 3 7

Please Indicate Type

Social Security Number (SSN#)

Indl

SERIAL # (FOR INTERNAL USE ONLY)

3 8 6 8 4

- 1.) GROSS RECEIPTS
- 2.) (MINUS) EXEMPTION (ex. stande commissions, affordable housing, reve
- 3.) PLEASE INDICATE REASO' EXEMPTION TAKEN ON I
- 4.) TAXABLE RECEIPTS
- 5.) TAX DUE (multiply lir
- 6.) PENALTY (if payr
- 7.) INTEREST (if
- 8.) (minus) CF
- 9.) TOTAL

Name

U N

D/F

Mo.

P O

City

C H R I S T

10.) Indicate Principal Business

Activity Code:

6512
(SEE REVERSE)

12.) Telephone #:

778 6240

Zip Code
00821

I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43.

THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE, PURSUANT TO TITLE 33 VIC SECTIONS 42 & 43.

Print Name: Thomas W. Luff

Title: Property Manager
(PRESIDENT, OWNER, ETC.)

Signature: [Handwritten Signature]

Date: 6/29/01

DATE: 6/29/01

2359

101-871216

\$ 1407.45

DOLLARS

RECEIVED WITH EXEMPTION PROCESS

MA

186.32

0.00

35186.32

1407.45

0.00

0.00

0.00

1407.45

UNION 29 2001

VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE CHRISTIANSTEDT

182140067131

002359

UNITED CORPORATION-TENANTS ACCOUNT

UNITED SHOPPING PLAZA
TEL (809) 778-8240
P.O. BOX 763
CHRISTIANSTEDT, VI 00821-0763

VI GOVT 128

One Hundred four hundred

FOR: G. Luff for May 01

Virgin Islands Commercial Bank
Christiansstedt, VI

A Z A

To VI Bureau of Internal Revenue
 From Thomas W. Luff, Property Manager
 United Shopping Plaza

Ms Leah D. Finley
 EIN 660 391 237

8/16/01

Following our review today of January and March Gross Receipts returns, I submit the following changes:

	Jan-01		
	Income	Tax @ 4%	
Form 720	23,369.00	934.76	
		815.04	Tax Paid
		119.72	Diff
		156.22	Per IRB

	Mar-01		
	Income	Tax @ 4%	
Form 720	50,573.75	2,022.95	Tax Due
		1,968.46	Tax Paid
Diff		54.49	Diff
		67.29	Per IRB

\$ 223.51 Total Owed per IRB Check enclosed

In the future all Gross receipts will be paid by our St. Thomas office.

Respectfully submitted,

Thomas W. Luff
 Thomas W. Luff, Property Manager
 United Shopping Plaza

UNITED CORPORATION-TENANTS ACCOUNT		2423
UNITED SHOPPING PLAZA TEL (809) 778-8240 PO BOX 783 CHRISTIANSTED, VI 00821-0783		101-671/216
PAY TO THE ORDER OF	<i>Virgin Islands Bureau of Internal Revenue</i>	DATE <u>8/20/01</u> \$ <u>223.51</u>
	<i>Two Hundred Twenty Three and 5/100</i>	DOLLARS <input type="checkbox"/>
FOR <i>Underpayment Gross Receipts Tax 1/01, 3/01</i>		<input type="checkbox"/>
VIRCB Virgin Islands Community Bank Christiansted Branch St. Croix, U.S.V.I.		
⑈002423⑈ ⑆021606713⑆ 182000135⑈		