

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J25021****1. Entity Name**
BEST WAY MAINTENANCE, INC.**FILED**
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90361 040 ***150.00

Principal Place of Business

1559 CYPRESS DRIVE
SUITE 1
JUPITER FL 33469
US

Mailing Address

212 RIVER TERRACE DR.
JUPITER FL 33469
US**C0054872**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2719009**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****BOCK, JAMES G**
212 RIVER TERR. DR.
JUPITER FL 33469

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
PSD BOCK, JAMES G 212 RIVER TERR. JUPITER FL			
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James G Bock, President James G. Bock
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR4/23/01 561-744-2836
Date Daytime Phone #

CR2E034 (10/00)