

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000097881

1. Entity Name

INFINITE SERVICES BY JARRET LASKER AND PATRICK K

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90169 016 ***150.00

Principal Place of Business

Mailing Address

4127 WHITING DRIVE S.E.
ST PETERSBURG FL 33705
US

PO BOX 1504
ST PETERSBURG FL 33731-1504
US

2. Principal Place of Business

3225 15TH ST. N.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1504

Suite, Apt. #, etc.

City & State

St. Pete, FL

City & State

St. Pete, FL

Zip

33704

Country

U.S.A

Zip

33731

Country

4. FEI Number

59-3511221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KRIEBEL, PATRICK
4127 WHITING DRIVE S.E.
ST PETERSBURG FL 33705

7. Name and Address of New Registered Agent

Name Patrick Kriebel

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

3225 15TH ST. N.

City

St. Petersburg

FL

Zip Code

33731

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 Patrick Kriebel

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

Patrick Kriebel

(NOTE: Registered Agent signature required when reinstating)

4-4-00

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, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME LASKER, JARRET
STREET ADDRESS 4127 WHITING DRIVE S.E.
CITY-ST-ZIP ST. PETERSBURG FL 33705

TITLE P ☐ Delete
NAME KRIEBEL, PATRICK
STREET ADDRESS 4127 WHITING DRIVE S.E.
CITY-ST-ZIP ST. PETERSBURG FL 33705

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Partner ☒ Change ☐ Addition
NAME Jarret Lasker
STREET ADDRESS 3225 15TH ST. N.
CITY-ST-ZIP St. Pete, FL 33704

TITLE Partner ☒ Change ☐ Addition
NAME Patrick Kriebel
STREET ADDRESS 3225 15TH ST. N.
CITY-ST-ZIP St. Pete, FL 33704

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: Jarret Lasker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-00

Date

(727) 432-2261

Daytime Phone #

CR2E034 (9/99)