

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90010 022 ***150.00

DOCUMENT # P99000104567

1. Entity Name
 B.Z. Industries, Inc. ✓

Principal Place of Business **Mailing Address**
 605 Manderly Run 605 Manderly Run
 Lake Mary, FL 32746 Lake Mary, FL 32746

2. Principal Place of Business **3. Mailing Address**
 1231 Chantry Place 1231 Chantry Place
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Heathrow, FL Heathrow, FL
Zip **Country** **Zip** **Country**
 32746 USA 32746 USA

4. FEI Number **Applied For**
 59-3613795 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Richard D. Symanns
 605 Manderly Run
 Lake Mary, FL 32746

7. Name and Address of New Registered Agent
Name Richard D. Symanns
Street Address (P.O. Box Number is Not Acceptable) 1231 Chantry Place
City Heathrow **FL** **Zip Code** 32746

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. ☐ **FILE NOW!!! FEE IS \$150.00**
 (See criteria on back) **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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Richard D. Symanns 605 Manderly Run Lake Mary, FL 32746 ☐ Delete	☒ Change ☐ Addition TITLE NAME STREET ADDRESS CITY - ST - ZIP	1231 Chantry Place Heathrow, FL 32746
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** _____ **Daytime Phone #** _____

CR2E034 (9/99)