

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State
 02-05-2002 90020 043 ***150.00

0189402 AV

DOCUMENT # S99829

1. Entity Name
ANY TASK INC.

Principal Place of Business Mailing Address

9010 NW 38 DR **PO BOX 9442**
#3 **CORAL SPRINGS FL 33075**
CORAL SPRINGS FL 33065



2. Principal Place of Business 3. Mailing Address

3259 N.W. 102 Terr.

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Coral Springs, Fl.

Zip Country Zip Country

33065 **U.S.A.**

4. FEI Number Applied For

65-0300803 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

POLL, RICHARD J.
9010 NW 38 DR
#3
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name **Richard J. Poll**

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

3259 N.W. 102 Terr.

City **Coral Springs** State **FL** Zip Code **33065**

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 **Richard J. Poll** **Richard J. Poll (President)** **1/28/02**

Signature, typed or printed name of registered agent and title if applicable. (NOT 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, 2002 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	<input type="checkbox"/> Delete
NAME	POLL, RICHARD J.	
STREET ADDRESS	PO BOX 9442	
CITY-ST-ZIP	CORAL SPRINGS FL 33075	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **SIG Richard J. Poll (President)** **1/28/02 (954) 753-2927**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/01)