

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90388 023 ***150.00

DOCUMENT # L94684

1. Entity Name
FIOR & COMPANY, INC.

Principal Place of Business

**1053 NORTH HIGHWAY 17-92
 LONGWOOD FL 32750
 US**

Mailing Address

**1053 NORTH HIGHWAY 17-92
 LONGWOOD FL 32750
 US**

2. Principal Place of Business

**104 Applewood DR.
 Suite, Apt. #, etc.**

3. Mailing Address

**104 Applewood DR.
 Suite, Apt. #, etc.**

City & State

Longwood FL.

City & State

Longwood FL

Zip

32750

Country

sewnote

Zip

32750

Country

sewnote

4. FEI Number

59-3024555

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**FIOR, THEODORE J., JR.
 368 AMETHYST COURT
 LAKE MARY FL 32746**

7. Name and Address of New Registered Agent

Name

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

City

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 fee if applicable

(NOTE: Registered Agent signature not required when installing)

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
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	DPT	☐ Delete
NAME	FIOR, THEODORE J., JR.	
STREET ADDRESS	368 AMETHYST CT.	
CITY-STATE-ZIP	LAKE MARY FL	
TITLE	DVS	☐ Delete
NAME	FIOR, DEBORAH L.	
STREET ADDRESS	368 AMETHYST CT.	
CITY-STATE-ZIP	LAKE MARY FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 empowerment.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Theodore J FIOR

1/19/2001

**407-695
 3275**

Signature Photo

CR2E034 (10/00)