

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90011 016 ***550.00

DOCUMENT # P96000041310

1. Entity Name
SWARTZ SALES, INC.

Principal Place of Business

4711 S HIMES AVE
#501
TAMPA FL 33611-2620

Mailing Address

4711 S HIMES AVE
#501
TAMPA FL 33611-2620

2. Principal Place of Business

7009 48 AVE E.
 Suite, Apt. #, etc.

3. Mailing Address

7009 48 AVE E.
 Suite, Apt. #, etc.

City & State

PALMETTO, FL

City & State

PALMETTO

4. FEI Number

65-0666797

Applied For

Not Applicable

Zip
34221-7341

Country

MANATEE

Zip

34221-7341

Country

MANATEE

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SWARTZ, ROBERT G
4711 S HIMES AVE
#501
TAMPA FL 33611

7009 48 AVE E.
PALMETTO, FL 34221

7. Name and Address of New Registered Agent

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 not applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

ROBERT G. SWARTZ 9-9-01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
SWARTZ, ROBERT G
4711 S HIMES AVE #501
TAMPA FL 33611-2620

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ST
SWARTZ, PHYLLIS M
4711 S HIMES AVE #501
TAMPA FL 33611-2620

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

7009 48 AVE EAST
PALMETTO, FL 34221-7341

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

7009 48 AVE EAST
PALMETTO, FL 34221-7341

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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
President 9-9-01 941-229-8776

Date

Daytime Phone #

CR2E034 (5/01)