

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 322927

1. Entity Name

DANIELS ENTERPRISES, INC.

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90187 028 ***150.00

Principal Place of Business
6401 9TH STREET NORTH
ST. PETERSBURG FL 33702-6623

Mailing Address
6401 9TH STREET NORTH
ST. PETERSBURG FL 33702-6623



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1212466

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANIELS, THOMAS B. JR
6401 9TH ST N
ST PETERSBURG FL 33702

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 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. (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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D	DUQUETTE, PAMELA	6401 9TH ST NORTH ST PETE FL	
	ST	DANIELS, MICHAEL D	6401 9TH ST N ST PETERSBURG FL	
	PD	DANIELS, THOMAS B JR	6401 9TH ST N ST PETERSBURG FL	
	D	DANIELS, ROBERT L	6401 9TH ST N ST PETERSBURG FL	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> 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 information.

SIGNATURE: Thomas B. Daniels, Jr., Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/2001 727-525-1564
Date Daytime Phone #

CR2E034 (10/00)