

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90177 021 ***150.00

DOCUMENT # 363071

1. Entity Name
FILTER SALES, INC.



Principal Place of Business
3850 RECKER HWY
WINTER HAVEN FL 33880
US

Mailing Address
P.O. BOX 2707
WINTER HAVEN FL 33880
US



2. Principal Place of Business
3850 RECKER HWY.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 2707
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Winter HAVEN FL.
Zip
33880
Country
POLK

City & State
WINTER HAVEN FL.
Zip
33883
Country
POLK

4. FEI Number **59-1289368**

Applied For
Not Applicable

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

HALL, JOSEPH H
5402 CRYSTAL BEACH RD POB 2707
WINTER HAVEN FL 33880

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.	
TITLE	NAME	TITLE	NAME
PD	HALL, JOSEPH H		
3850 RECKER HIGHWAY			
WINTER HAVEN FL			
STD	HALL, ROMOLA J		
3850 RECKER HIGHWAY			
WINTER HAVEN FL			

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BY: FILTER SALES INC.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-03 863-293-9771
Date Daytime Phone #

CR2E034 (10/02)