

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 429862**

1. Entity Name

MOORE PAINTING, INC.**FILED**
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90385 007 ***150.00

734694

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
1026 28TH STREET 1026 28TH STREET
C/O SIDNEY C. MOORE, JR. C/O SIDNEY C. MOORE, JR.
ORLANDO FL 32805 ORLANDO FL 32805

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

4. FEI Number **59-1470101** 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
MOORE, SIDNEY C. JR. Name
1026 28TH STREET Street Address (P.O. Box Number is Not Acceptable)
ORLANDO FL 32805 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 Sidney C Moore Jr Sidney C Moore Jr 3/27/01
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. ☐ **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	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, SIDNEY C. JR.	NAME	
STREET ADDRESS	1026 28TH STREET	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	CITY-ST-ZIP	
TITLE	STD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, TRINA	NAME	
STREET ADDRESS	1026 28TH STREET	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COSTELLO, ASHLEY E	NAME	
STREET ADDRESS	1026 28TH STREET	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 00000	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: Sidney C. Moore Jr Sidney C Moore Jr 3/27/01 4078414070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0064665

CR2E034 (10/00)