

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 470565

1. Entity Name

PEDERSEN ELECTRIC, INC.

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90209 003 ***150.00

Principal Place of Business

Mailing Address

3530 N.W. 10TH AVENUE
FORT LAUDERDALE FL 33309

3530 N.W. 10TH AVENUE
FORT LAUDERDALE FL 33309-5902

035598



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

59-1702678

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

ODZIMOWSKI, CONSTANCE
4041 N. HARBOR CITY BLVD.
MELBOURNE FL 32935

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, 2000 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 VS ☐ Delete

NAME PEDERSEN, CHARLES E.
STREET ADDRESS 1380 SW 57TH AVE.
CITY-ST-ZIP PLANTATION FL

TITLE AV ☐ Delete

NAME PEDERSEN, JEANNETTE V.
STREET ADDRESS 4131 N HARBOR CITY BLVD
CITY-ST-ZIP MELBOURNE FL

TITLE PT ☐ Delete

NAME PEDERSEN, LINDA
STREET ADDRESS 1380 SW 57TH AVE.
CITY-ST-ZIP PLANTATION FL

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NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

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:

Linda Pedersen LINDA PEDERSEN 3/9/00 954-537-5589

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)