

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90033 018 ***150.00

DOCUMENT # 514926

1. Entity Name

FRANK W. BRUEGGER Painting & DECORATING INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15822 E. WIND CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

15822 E. WIND CIRCLE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SUNRISE, FLORIDA

Zip

33320

Country

City & State

SUNRISE, FLORIDA

Zip

33320

Country

4. FEI Number

59-1702520

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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

Frank W. Bruegger Jr.
Signature, typed or printed name of registered agent and title if applicable.

FRANK W. BRUEGGER JR. President

2/26/02

(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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
PRESIDENT
FRANK W. BRUEGGER JR.
16703 W. PLEASURE DRIVE
LOXAHATCHEE, FLA. 33470

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRESIDENT
HARRIET BRUEGGER
16703 W. PLEASURE DRIVE
LOXAHATCHEE FLA. 33470

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Frank W. Bruegger Jr. president

2/26/02

561-333-3389
305-754-1577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)