

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90064 002 ***150.00

DOCUMENT # 582809

1. Entity Name

RI-JAK CONSTRUCTION CORPORATION

Principal Place of Business

Mailing Address

530 17 ST
WEST PALM BEACH FL 33407
US

530 17 ST
WEST PALM BEACH FL 33407-6435
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MITCHELL RONALD L
6222 FERNLEY ROAD
LAKE WORTH FL 33467

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
NAME
STRIKE ADDRESS
CITY-ST-ZIP
ST
RIEDEL, EVERETT J
244 CHICKAMAUGA AVENUE
WEST PALM BEACH FL

☐ Delete

TITLE
NAME
STRIKE ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STRIKE ADDRESS
CITY-ST-ZIP
PV
MITCHELL, RONALD L
6222 FERNLEY ROAD
LAKE WORTH FL

☐ Delete

TITLE
NAME
STRIKE ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STRIKE ADDRESS
CITY-ST-ZIP

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☐ Delete

TITLE
NAME
STRIKE ADDRESS
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: Ronald L Mitchell 4-6-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-561-659-3400

CR2E034 (9/99)