

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 657573

1. Entity Name

ELECTRICAL MATERIALS INSTALLATION, INC.

Principal Place of Business

3711 TROUT ISLAND PL  
MELBOURNE FL 32934  
US

Mailing Address

3711 TROUT ISLAND PL  
MELBOURNE FL 32934  
US

2. Principal Place of Business

1945 CIRCLE DR.

Suite, Apt. #, etc.

3. Mailing Address

1945 CIRCLE DR.

Suite, Apt. #, etc.

City & State

MELBOURNE, FL.

City & State

MELBOURNE, FL.

Zip

32904

Country

BREUARD

Zip

32904

Country

BREUARD

4. FEI Number

59-1999567

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WILBURN, TYRONE LEE  
3711 TROUT ISLAND PL  
MELBOURNE FL 32934

7. Name and Address of New Registered Agent

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, 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PST  
WILBURN, TYRONE LEE  
3711 TROUT ISLAND PL  
MELBOURNE FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WILBURN, TYRONE LEE  
3711 TROUT ISLAND PL  
MELBOURNE FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
M  
OLIVER, CRAIG ALAN  
3032 ONTARIO CR. WEST  
MELBOURNE, FL. 32935 ☐ Change ☒ Addition

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
Wilburn, Joyce Ann  
3711 TROUT ISLAND PL.  
MELBOURNE, FL. ☐ Change ☒ Addition

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

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

TITLE  
NAME  
STREET 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: *Tyrone Lee Wilburn* TYRONE LEE Wilburn 4/30/01 321-733-6005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

FILED  
May 14, 2001 8:00 am  
Secretary of State

05-14-2001 90190 009 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)