

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 857251

1. Entity Name

ROCKY MOUNTAIN FIBER PLUS, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90187 010 ***150.00

Principal Place of Business

Mailing Address

% DON PRINGLE, CPA
502 E. JOHN ST., SUITE H
CARSON CITY NV 89706-3088

% DON PRINGLE, CPA
502 E. JOHN ST., SUITE H
CARSON CITY NV 89706-3078

2. Principal Place of Business

3. Mailing Address

ROCKY MOUNTAIN FIBER PLUS, INC.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P. O. BOX 452

City & State
KIOWA, CO

City & State
KIOWA, CO

4. FEI Number
93-0728857

Applied For

Not Applicable

Zip
80117

Country

Zip
80117-0452

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 PD ☐ Delete
NAME HILL, JESSE
STREET ADDRESS PO BOX 1169 N/A
CITY-ST-ZIP ELIZABETH CO

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

TITLE ST ☐ Delete
NAME SERRES, DENISE
STREET ADDRESS 26 FALCON HILLS DR
CITY-ST-ZIP HIGHLANDS RANCH CO

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

TITLE D ☒ Delete
NAME ROBINSON, GENE
STREET ADDRESS 45 FALCON HILLS DR
CITY-ST-ZIP HIGHLANDS RANCH. CO.

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

TITLE D ☒ Delete
NAME HILL, JESSE
STREET ADDRESS P.O. BOX 1169 N/A
CITY-ST-ZIP ELIZABETH CO

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

TITLE CEO ☐ Delete
NAME CABRAL, EUGENE
STREET ADDRESS 33 FALCON HILLS DR
CITY-ST-ZIP HIGHLANDS RANCH CO

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Denise Serres

2-25-00

Date

Daytime Phone #

CR2E034 (9/99)