

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91326 001 ***150.00

DOCUMENT # F00000004294

1. Entity Name
**REMARKETING
 INSPECTION SOLUTIONS, INC.**

N/C
 FLD
 5/17/01
 CHM

Principal Place of Business
**1400 LAKE HEARN DR.
 ATLANTA, GA 30319**

Mailing Address
SAME

2. Principal Place of Business
ABOVE

3. Mailing Address
ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
58-2560617

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS ST.
 TALLAHASSEE, FL. 32301-2525**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|----------------|---------------------------------|
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | SEE ATTACHMENT |
| TITLE | <input type="checkbox"/> Delete |
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| 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 address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/01

Date

404-843-5000

Daytime Phone #

CR2E034 (11/00)

Attachment Doc # F00000004294

Dir / Off by Company Work
Address

Inspection Solution Corp.

C 6607306 4/28/2001

Title

Name

Directors

Darryll M Ceccoli

1400 Lake Hearn Drive, NE
Atlanta, GA 30319
USA
.....

Dean H Eisner

1400 Lake Hearn Drive, NE
Atlanta, GA 30319
USA
.....

Robert E Gartin

1400 Lake Hearn Drive, NE
Atlanta, GA 30319
USA
.....

Andrew A Merdek

1400 Lake Hearn Drive
Atlanta, GA 30319
USA
.....

Officers

President

Dean H Eisner

1400 Lake Hearn Drive, NE
Atlanta, GA 30319
USA
.....

Attachment Doc# F00000004294

Dir / Off by Company Work
Address

Inspection Solution Corp.

CL607300 4/20/2001

| Title | Name |
|----------------------------|---|
| Vice President | Darryll M Ceccoli 1400 Lake Hearn Drive, NE Atlanta, GA 30319 USA |
| Vice President | Ralph M Liniado 1400 Lake Hearn Drive, NE Atlanta, GA 30319 USA |
| Vice President & Treasurer | Robert E Gartin 1400 Lake Hearn Drive, NE Atlanta, GA 30319 USA |
| Secretary | Andrew A Merdek 1400 Lake Hearn Drive Atlanta, GA 30319 USA |