

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F86098

1. Entity Name

P.F.T., INC.

FILED

01 JUL 16 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1885 W COMMERCIAL BLVD
#120
FT LAUDERDALE FL 33324
US

Mailing Address

1885 W COMMERCIAL BLVD
#120
FT LAUDERDALE FL 33308
US

2. Principal Place of Business

1835 S. PERIMETER RD
#120

3. Mailing Address

1835 S. PERIMETER RD
Suite, Apt. #, etc.

City & State

FT. LAUD, FL

City & State

FT. LAUD FL

Zip

33309

Country

USA

Zip

33309

Country

USA

05/10/01 90212 028 \$61.25
06/27/01 90005 042 \$61.25

4. FEI Number 59-2198873

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSS, PATRICIA
1885 W COMMERCIAL BLVD
SUITE #120
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

PATRICIA F. ROSS
1835 S. PERIMETER RD
#120
FT. LAUD FL FL 33309

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

Patricia Ross

NOTE: Registered Agent signature required when reappointing.

DATE

4/29/01

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 State10. Election Campaign Financing
Trust Fund Contribution.\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME FAY, MARY J.
STREET ADDRESS 1620 S OCEAN BLVD #48
CITY-ST-ZIP POMPANO BEACH FL

Delete

TITLE VD
NAME FAY, JOHN III
STREET ADDRESS 4170 PALMETTO TRAIL
CITY-ST-ZIP FT LAUDERDALE FL

Delete

TITLE S
NAME ROSS, PATRICIA FAY
STREET ADDRESS 2534 GOLF VIEW DR
CITY-ST-ZIP FT LAUDERDALE FL

Delete

TITLE T
NAME ROSS, GARY J
STREET ADDRESS 2534 GOLF VIEW DR
CITY-ST-ZIP FT LAUDERDALE FL

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 GARY J. ROSS POTS
NAME
STREET ADDRESS 2533 SANCTUARY DR
CITY-ST-ZIP WESTON, FL 33327

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

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)(f), 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, without other like empowered.

SIGNATURE:

Gary J. Ross

Date

04/28/01

Desktop Photo #

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