

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F98000006540**

1. Entity Name

PEMCO CORPORATION**FILED**
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90077 007 ***150.00

Principal Place of Business

Mailing Address

**5601 EASTERN AVENUE
BALTIMORE MD 21224****5601 EASTERN AVENUE
BALTIMORE MD 21224-2726**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **52-2056142**

Applied For

Not Applicable

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

**C T CORPORATION SYSTEM
1200 SOUTH 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	MCMAHON, JACK	5601 EASTERN AVENUE	BALTIMORE MD 21224	<input type="checkbox"/>
	TSC	STOKES, SANDRA	5601 EASTERN AVENUE	<input type="checkbox"/>
	D	WALKER, JOHN	123 BUCKINGHAM PALACE RD LONDON	<input type="checkbox"/>
	D	HUEP, RALF	EYSSENECKSTRAUSSE 10, 60322 FRANKFURT	<input type="checkbox"/>
	D	MCALDER, IAN	PATHOEKWEI 116, B-8000 BRUGGE	<input type="checkbox"/>
	D	ROBERTSON, ANDREW	PATHOEKWEI 116, B-8000 BRUGGE	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Sandra J. Stokes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/8/00 410 631 4323

CR2E034 (9/99)