

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91429 025 ***150.00

0041200 AV

DOCUMENT # G46826

1. Entity Name

CAROLCO INDUSTRIAL SERVICES, INC.

Principal Place of Business

**4611 US HWY 41 S.
TAMPA FL 33619
US**

Mailing Address

**P.O. BOX 273447
TAMPA FL 33688-3447**

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

59-2623665

Applied For

Not Applicable

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

**WARD, SAMMY F.
2211 BELLE CHASE CIR
TAMPA FL 33634**

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, 2002 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 **P** ☐ Delete
NAME **WARD, SAMMY F.**
STREET ADDRESS **2211 BELLE CHASE CIR**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

Sammy F. Ward
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/2002
Date

813/247-6453
Daytime Phone #

CR2E034 (9/01)



INDUSTRIAL SERVICES, INC.

P.O. Box 273447 Tampa, Florida 33688

Shop: (813) 247-6453

Fax: (813) 248-6805

March 20, 2002

DIVISION OF CORPORATIONS

Uniform Business Report Filings

P. O. Box 1500

Tallahassee, Florida 32302-1500

RE: 2002 Uniform Business Report (UBR)
Carolco Industrial Services, Inc.

Gentlemen:

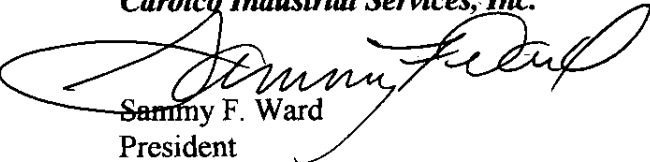
I enclose the ***2002 Uniform Business Report (UBR)*** for the Florida corporation known as Carolco Industrial Services, Inc.

Also, I have enclosed check #4586 in the amount of ***One Hundred Fifty Dollars (\$150.00)*** as payment for the annual fee.

Thank you.

Sincerely,

Carolco Industrial Services, Inc.



Sammy F. Ward
President

SFW:vjb
Enclosures