

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90396 032 ***150.00

DOCUMENT # G93445

1. Entity Name
COMGRAFIX, INC.

Principal Place of Business
1765 CARNEGIE AVE
CLEARWATER FL 33756

Mailing Address
1765 CARNEGIE AVE
CLEARWATER FL 33756

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 **59-2442632**

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

PLATTE, DAVID
603 INDIAN ROCKS RD
BELLEAIR FL 34616

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
PSD
HORST, ROBERT P.
1765 CARNEGIE AVE
CLEARWATER FL 33756

☐ Delete

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

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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: ROBERT P. HORST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/02 727.585.7799

Date Daytime Phone #

CR2E034 (4/02)



ComGrafix, Inc.

1765 Carnegie Avenue Clearwater, FL 33756
(727) 585-7799 Fax (727) 518-0900
<http://www.comgrafix.com>

B01271613

July 2, 2002

Attn: Ahmad
693445

Division of Corporations
Uniform Business report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Madam or Sir:

Enclosed is a check for \$150 and the UBR for 2002. We did not receive the first notice, which is the same thing that happened last year and we ended up paying the \$550.

I called your office and talked to Mark and he suggested I send a letter with the check for \$150 and explain the situation.

We are still in business and have been for 18 years and would appreciate getting earlier notification.

Sincerely,

Robert P. Horst
President