

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H11534

1. Entity Name

WILLIAMS BANK INSTALLATION, INC.

FILED

Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90031 049 ***150.00

Principal Place of Business

Mailing Address

1402 E LAS OLAS BLVD
#1093
FT LAUDERDALE FL 33301
US

1402 E LAS OLAS BLVD
#1093
FT LAUDERDALE FL 33301-2336
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1314 E. Las Olas Blvd
Suite, Apt. #, etc.
1093

3. Mailing Address

1314 E. Las Olas Blvd
Suite, Apt. #, etc.
1093

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33301-2334

Country

USA

Zip

33301-2334

Country

USA

4. FEI Number

59-2444726

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

WELLS, JOSEPH
1402 E LAS OLAS BLVD
#1093
FT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

1314 E. Las Olas Blvd

#1093

City

Ft. Lauderdale

FL

Zip Code

33301

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
P
WELLS, JOSEPH
861 NW 85 TERRACE #1808
PLANTATION FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
FLEMING, NANCY
8239 NW 18th Street
Plantation, FL 33324 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
WILLIFORD, DAVID
530 NW 11 AVE
FT. LAUDERDALE FL 33301 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
WELLS, ADAM
861 NW 85 TERRACE #1808
PLANTATION FL ☒ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ Delete

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)(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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)