

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90378 036 ***150.00

DOCUMENT # H78306

1. Entity Name
VALANT PAINTING, INC.

Principal Place of Business

**C/O HARRY VALANTASIS
3920 NEWPORT ST
COCOA FL 32927
US**

Mailing Address

**C/O HARRY VALANTASIS
3920 NEWPORT ST
COCOA FL 32927
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1425 NEWFOUND HARBOR DR

Suite, Apt. #, etc.

3. Mailing Address

1425 NEWFOUND HARBOR DR.

Suite, Apt. #, etc.

City & State

MERRITT ISLAND FL.

City & State

MERRITT ISLAND FL.

4. FEI Number

59-2596985

Applied For

Not Applicable

Zip

32952

Country

U.S.

Zip

32952

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**VALANTASIS, HARRY
3920 NEWPORT ST
COCOA FL 32927**

7. Name and Address of New Registered Agent

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]

HARRY VALANTASIS PRESIDENT

01-10-02

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 **HARRY VALANTASIS**
STREET ADDRESS **3920 NEWPORT ST.**
CITY-ST-ZIP **COCOA FL**

TITLE **S** ☒ Delete
NAME **VALANTASIS, CONSTANTINE**
STREET ADDRESS **190 PINELLAS LANE**
CITY-ST-ZIP **COCOA BEACH FL 32931**

TITLE **V** ☐ Delete
NAME **VALANTASIS, GEORGE**
STREET ADDRESS **1425 NEWFOUND HARBOR DR**
CITY-ST-ZIP **MERRITT ISLAND FL 32952**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **HARRY VALANTASIS**
STREET ADDRESS **1425 NEWFOUND HARBOR DR.**
CITY-ST-ZIP **MERRITT ISLAND, FL. 32952**

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

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

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CITY-ST-ZIP

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

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]

HARRY VALANTASIS

Date

Daytime Phone #

01-10-02 321-452-9144

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)