2002

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90146 030 ***150.00

DOCUMENT # H96554

1. Entity Name
GARRETT'S ENTERPRISES OF PANAMA CITY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1623 WEST 15TH STREET	1623 WEST 15TH STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
PANAMA CITY, FL	PANAMA CITY, FL
Zip 32401-1743 Country	Zip 32401-1743 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2664183 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name TRAVIS O. GARRETT

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

1623 WEST 15TH STREET

City PANAMA CITY FL Zip Code 32401

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 _____ DATE

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	DP
NAME	GARRETT, TRAVIS O.
STREET ADDRESS	2133 ST ANDREWS BLVD
CITY-ST-ZIP	PANAMA CITY FL 32405
TITLE	D
NAME	GARRETT, MICHAEL
STREET ADDRESS	2122 ST ANDREWS BLVD
CITY-ST-ZIP	PANAMA CITY FL 32405

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X _____ TRAVIS GARRETT 4/25/2002 850763870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Date

CR2E034B (12/01)