

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 27, 2001 8:00 am
Secretary of State

01-27-2001 90061 043 ***150.00

DOCUMENT # J05487

1. Entity Name

PRAWL CONSTRUCTION COMPANY, INC.

Principal Place of Business

% LUIS PRAWL
2232 CURTIS DR. NORTH
CLEARWATER FL 34624

Mailing Address

% LUIS PRAWL
2232 CURTIS DR. NORTH
CLEARWATER FL 34624

2. Principal Place of Business

2840 West Bay Drive

3. Mailing Address

2840 West Bay Drive

Suite, Apt. #, etc.

PMB #107

Suite, Apt. #, etc.

PMB #107

City & State

Belleair Bluffs, FL

City & State

Belleair Bluffs, FL

Zip

33770

Country

Pinellas

Zip

33770

Country

Pinellas

4. FEI Number 59-2652163

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

PRAWL, LUIS
2232 CURTIS DR. NORTH
CLEARWATER FL 34624

Name

PRAWL, LUIS

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

2827 Trailwood Court

City

Clearwater

FL

Zip Code

34621

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, 2001 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	PD	<input type="checkbox"/> Delete
NAME	PRAWL, LUIS	
STREET ADDRESS	2232 CURTIS DR N	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PRAWL, JAIME	
STREET ADDRESS	2232 CURTIS DR N	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	PRAWL, ANGEL	
STREET ADDRESS	2232 CURTIS DR N	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRAWL, LUIS	
STREET ADDRESS	2827 Trailwood Court	
CITY-ST-ZIP	Clearwater FL 34621	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRAWL, JAIME	
STREET ADDRESS	1655 Brookside Blvd	
CITY-ST-ZIP	Largo FL 33770	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRAWL, ANGEL	
STREET ADDRESS	1655 Brookside Blvd	
CITY-ST-ZIP	Largo FL 33770	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Angel Prawl (Corp Sec)

1-19-01 (727) 5354878

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)