

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2001 8:00 am
Secretary of State

06-06-2001 90009 022 ***150.00

DOCUMENT #

5538339 ✓

1. Entity Name

M&R Service Major Appliance Repair, Inc.

Principal Place of Business

Mailing Address

131 NW 13th Street
 E40

BOCCARATON, FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-2783037

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Valerie Juhren
 131 NW 13th St, E40
 BOCCARATON, FL 33432

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 (Typed or printed name of registered agent and filer applicable)

(If filer is Registered Agent, signature required when certifying)

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 ☐ Delete

TITLE ☐ Change ☐ Addition

NAME Michael Matulis
 STREET ADDRESS 131 NW 13th St, E40
 CITY-ST-ZIP BOCCARATON, FL 33432

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

NAME V. Pres
 NAME Raymond Juhren
 STREET ADDRESS 131 NW 13th St, E40
 CITY-ST-ZIP BOCCARATON, FL 33432

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

NAME Secy./Treas.
 NAME Valerie Juhren
 STREET ADDRESS 131 NW 13th St, E40
 CITY-ST-ZIP BOCCARATON, FL 33432

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

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NAME
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 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:

Valerie Juhren 5/30/01 Valerie Juhren

CR2E034 (11/00)