## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # J99800 Aug 03, 2000 8:00 am 1. Entity Name Secretary of State PRIEDE MAL CONSTRUCTORS, INC. 08-03-2000 90039 016 \*\*\*150.00 Principal Place of Business Mailing Address 1483 Tampa Park Plaza 1483 Tampa Park Plaza Tampa, Florida 33605 Tampa, Florida 33605 D0076414 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Not Applicable 59-2869734 Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Vincent Philip Nuccio Street Address (P.O. Box Number is Not Acceptable) 4049 Henderson Boulevard <sup>Zip</sup> 33629 Tampa 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Change ☐ Delete TITLE. D/P/T NAME NAME Priede, Nelson J. STREET ADDRESS STREET ADDRESS 3606 Little Road CITY-ST-7IP CITY-ST-ZIP Tampa, Florida 33549 Change ☐ Addition ☐ Delete TITLE D/V/S NAME NAME Màlphus, Wilbert STREET ADDRESS STREET ADDRESS 483 Tampa Park Plaza CITY-ST-ZIP Tampa, Florida 33605 Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 errowwered 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.

President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)

## PRIEDE MAL CONSTRUCTORS, INC

1483 Tampa Park Plaza Tampa, Florida 33605

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: 2000 Uniform Business Report (UBR)

## Dear Sir/Madam:

In checking our file, it has been noted that we failed to receive the 2000 Uniform Business Report (UBR) for filing. In a telephone conversation with a representative from your office, I was advised that a form would be mailed to me to complete for Priede Mal Constructors, Inc. I was also advised to return the UBR form together with out check in the amount of \$150.00.

I am herewith enclosing the UBR form completed for 2000 together with a check covering the annual fee of \$150,00.

Sincerely yours,

Nelson J. Priede

President

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