

FILED

Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90073 035 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # K01122

1. Entity Name

Princeton Industries, Inc

DO NOT WRITE IN THIS SPACE

420366

2. Principal Place of Business

12550 NW 39th ST

Suite, Apt. #, etc.

3. Mailing Address

12550 NW 39th ST

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Coral Springs, FL

City & State

Coral Springs, FL

4. FEI Number

65-0046690

Applied For

Not Applicable

Zip

33065

Country

US

Zip

33065

Country

US

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

7. Name and Address of Current Registered Agent

Name

Brewster, Brad

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

12550 NW 39th ST

City

Coral Spring

FL

Zip Code

33065

**DO NOT WRITE
IN THIS SPACE**

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

BRAD W. BREWSTER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Brad W. Brewster, 2/13/02

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD
NAME	Brewster, Bradley W
STREET ADDRESS	4908 NW 101 Ave
CITY - ST - ZIP	Coral Springs, FL 33076

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	TD
NAME	Brewster, Brent D
STREET ADDRESS	4908 NW 101 Ave
CITY - ST - ZIP	Coral Springs, FL 33076

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	V.P.D. SEC.
NAME	Kaye, Marc B
STREET ADDRESS	5848 NW 120th Ave
CITY - ST - ZIP	Coral Springs, FL 33076

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

SIGNATURE:

Marc B. Kaye VP

Marc B. Kaye

2/13/02

954-755-7614

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)