

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K03808

1. Entity Name

HENRY FLACK INTERNATIONAL, INC.

FILED
Jul 28, 2000 8:00 am
Secretary of State

07-28-2000 90149 034 ***550.00

Principal Place of Business

PO BOX 865110
PLANO TX 75086
US

Mailing Address

601 GLENVIEW CIR
GARLAND TX 75040
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0013751

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

BARTIROME, ANTHONY D.
2 N TAMiami TRAIL
STE 408
SARASOTA FL 34236

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 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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
BOLLOM, J.W.
16 FOREST RIDGE
KESTON, KENT ENGLAND

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSD
HEMPHILL, E
4 HIGHGROVE CLOSE
CHISLEHURST, KENT, ENGLAND

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
BOLLOM, MARTIN PATRICK
5 WHITECROFT WAY
BECKENHAM KE

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
ROBERTSON, ALISTAIR G
42 BOWES WOOD
NEW ASH GREEN, KENT, ENGLAND

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CITY - ST - ZIP

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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:

ALISTAIR G ROBERTSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/19/00 1972 8675677

CR2E034 (5/00)