

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90211 037 ***150.00

DOCUMENT # K53582
 1. Entity Name
A-SCREEN REPAIR, INC.

Principal Place of Business C/O JEFFREY L. WATERBURY 108 BAYWOOD AVE LONGWOOD FL 32750 US	Mailing Address C/O JEFFREY L. WATERBURY 108 BAYWOOD AVE. LONGWOOD FL 32750-3421 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2200 W. WINTER SPRINGS BLVD	3. Mailing Address 2200 W. WINTER SPRINGS BLVD
Suite, Apt. #, etc. SUITE 106	Suite, Apt. #, etc. SUITE 106
City & State DAIRDO, FL, 32765	City & State DAIRDO, FL
Zip 32765	Country USA

4. FEI Number 59-2920232	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WATERBURY, JEFFREY L.
108 BAYWOOD AVE
LONGWOOD FL 32750

*2200 W. WINTER SPRINGS BLVD
 SUITE 106
 DAIRDO, FL, 32765
 USA*

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

TITLE	D <input type="checkbox"/> Delete
NAME	WATERBURY, JEFFREY L.
STREET ADDRESS	108 BAYWOOD AVE
CITY-ST-ZIP	LONGWOOD FL
TITLE	D <input type="checkbox"/> Delete
NAME	WATERBURY, JOYCE C.
STREET ADDRESS	108 BAYWOOD AVE
CITY-ST-ZIP	LONGWOOD FL
TITLE	ST <input checked="" type="checkbox"/> Delete
NAME	MCCULLY, ANDRE L.
STREET ADDRESS	108 BAYWOOD AVE
CITY-ST-ZIP	LONGWOOD FL 32750
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	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATERBURY, JEFFREY L.
STREET ADDRESS	2200 W. WINTER SPRINGS BLVD SU. 106
CITY-ST-ZIP	DAIRDO, FL 32765
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATERBURY, JOYCE C.
STREET ADDRESS	2200 W. WINTER SPRINGS BLVD SU. 106
CITY-ST-ZIP	DAIRDO, FL 32765
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: *Jeffrey L. Waterbury* **JEFFREY L. WATERBURY** 4-18-00 (400) 509-3485
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #