

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

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90311 011 ***150.00

DOCUMENT # ~~0594705-01~~

1. Entity Name

K80598

Quick Ric Hauling, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1457 SATSUMA STREET

Suite, Apt. #, etc.

Clearwater, Florida

City & State

33756

Zip

Country

USA

3. Mailing Address

1457 SATSUMA ST.

Suite, Apt. #, etc.

City & State

Clearwater FL

Zip

33756

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

EIN #59-2956078

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

(SAME)

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

City

FL

Zip Code

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Richard Savid
STREET ADDRESS	1457 satsuma street
CITY-ST-ZIP	Clearwater, FL 33756
TITLE	Secretary
NAME	merla Savid
STREET ADDRESS	1457 satsuma street
CITY-ST-ZIP	Clearwater, FL 33756
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Savid* (Richard Savid)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-04

727-442-5501

Date

Daytime Phone #

CR2E034B (12/02)