

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

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90038 022 ***150.00

DOCUMENT # **L50904**

1. Entity Name

Hugh Heslin Trim Work, Inc.

DO NOT WRITE IN THIS SPACE

427429

2. Principal Place of Business

13458 80th Lane North

Suite, Apt. #, etc.

3. Mailing Address

13458 80th Lane North

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach FL

City & State

West Palm Beach FL

4. FEI Number

65-0175566

Applied For

Not Applicable

Zip

33412

Country

USA

Zip

33412

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

HUGH HESLIN

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

13458 80th Lane North

City

West Palm Beach

FL

Zip Code

33412

**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

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) ☒

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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P**
NAME **HUGH HESLIN**
STREET ADDRESS **13458 80th Lane No.**
CITY-ST-ZIP **WPB FL 33412**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S**
NAME **Julie Heslin**
STREET ADDRESS **13458 80th Lane No**
CITY-ST-ZIP **WPB FL 33412**

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hugh Heslin

President

Date

Daytime Phone #

3/9/02

CR2E034B (12/01)