

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L65039

1. Entity Name

CHEM-TEL INC.

**FILED**  
Feb 10, 2000 8:00 am  
Secretary of State

02-10-2000 90061 006 \*\*\*150.00

Principal Place of Business

Mailing Address

1313 8TH AVE  
3RD FL  
TAMPA FL 33605  
US

1313 8TH AVE  
3RD FL  
TAMPA FL 33605-3611  
US

2. Principal Place of Business

1308 N. MARION ST

3. Mailing Address

1308 N. MARION ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

59-2998814

Applied For

Not Applicable

Zip

33602

Country

USA

Zip

33602

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SINGLETARY, THOMAS J  
1313 8TH AVENUE  
3RD FLOOR  
TAMPA FL 33605

7. Name and Address of New Registered Agent

Name *Thomas J. Singletary*  
Street Address (P.O. Box Number is Not Acceptable)  
1308 N. MARION ST  
City Tampa FL Zip Code 33602

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 *Thomas J. Singletary* X *Thomas J. Singletary*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-25-2000

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 \$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 ☐ Delete

NAME SINGLETARY, THOMAS JR  
STREET ADDRESS 1313 8TH AVENUE 3RD FLOOR  
CITY-ST-ZIP TAMPA FL 33605

TITLE P ☐ Delete

NAME TSOKOS, ELISABETH  
STREET ADDRESS 1313 8TH AVENUE 3TH FLOOR  
CITY-ST-ZIP TAMPA FL 33605

TITLE M ☐ Delete

NAME TSOKOS, PETER  
STREET ADDRESS 1313 8TH AVENUE 3RD FLOOR  
CITY-ST-ZIP TAMPA FL 33605

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 1308 N. MARION ST  
CITY-ST-ZIP Tampa, FL 33602

TITLE ☒ Change ☐ Addition

NAME THEOR, LOS, ELISABETH  
STREET ADDRESS 1308 N. MARION ST  
CITY-ST-ZIP Tampa, FL 33602

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 1308 N. MARION ST  
CITY-ST-ZIP Tampa, FL 33602

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: *Thomas J. Singletary* Director X *Thomas J. Singletary*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

813-  
237-0548

CR2E034 (9/99)