

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L94684**

1. Entity Name
FIOR & COMPANY, INC.

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90335 035 ***150.00

Principal Place of Business 104 APPLEWOOD DR LONGWOOD FL 32750 US	Mailing Address 104 APPLEWOOD DR LONGWOOD FL 32750 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-3024555	Applied For ☐
	Not Applicable ☐

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FIOR, THEODORE J., JR. 368 AMETHYST COURT LAKE MARY FL 32748 951 N. PREVATT AVE LAKE Helen FL. 32744

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State
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
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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, 2002 Fee will be \$850.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution, ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT FIOR, THEODORE J., JR. 368 AMETHYST CT. LAKE MARY FL 951 N. PREVATT AVE LAKE Helen FL. 32744	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS FIOR, DEBORAH L. 368 AMETHYST CT. LAKE MARY FL 951 N. PREVATT AVE LAKE Helen FL. 32744	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:	4/3/02 402-695-3322
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

CR2E034 (9/01)

Attachment

7/13/02

L 94684

To whom it may concern,
Here is a copy

of ck. stub for my
Corp. Renewal.

This check has
never been returned to
the bank.

I am enclosing.

Another check to cover my
corp. I have stopped payment
on this check. Since I
have talked to Matt. at
your office. Enclosed also
is a new corp. form.

Thanks for your help.

Theodore J Fior
Theodore J Fior

Fior + Co. Inc.

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10446		BAL BROT FORD
DATE	4/2/02	
TO	HARMON Glass	
FOR		
	TOTAL	
	THIS CHECK	156 53
	OTHER TRANS. +/-	
TAX DEDUCTIBLE ☐	BALANCE	

10447		
DATE	4/3/02	
TO	Dept of State	
FOR	Corp. Renew.	
	TOTAL	
	THIS CHECK	150 -
	OTHER TRANS. +/-	
TAX DEDUCTIBLE ☐	BALANCE	

10448		
DATE	4/3/02	
TO	Chester Williams	
FOR		
	TOTAL	
	THIS CHECK	400 -