

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90012 021 ***150.00

DOCUMENT # M79491

1. Entity Name

D & S ELECTRICAL OF BREVARD, INC.

Principal Place of Business

**733-A N DR
MELBOURNE FL 32934
US**

Mailing Address

**4280 DOW RD
UNIT 107
MELBOURNE FL 32934-7664
US**

2. Principal Place of Business

3. Mailing Address

2035 Commodore St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Melbourne, Florida

Zip

Country

32904

BREVARD

4. FEI Number

59-2890185

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DONALD A PEPIN
2010 COMMODORE ST
MELBOURNE FL 32934-8405**

7. Name and Address of New Registered Agent

Name

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

2035 Commodore St.

City

Melbourne

FL

32904

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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 **S** ☐ Delete
NAME **PEPIN, DONALD ANDREW, JR**
STREET ADDRESS **2010 COMMODORE ST**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **PD** ☐ Delete
NAME **PEPIN, DONALD ANDREW**
STREET ADDRESS **2035 COMMODORE ST**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **VP** ☐ Delete
NAME **PEPIN, SYLVIA KAY**
STREET ADDRESS **2035 COMMODORE ST**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **T** ☐ Delete
NAME **PEPIN, TRAVIS L**
STREET ADDRESS **753-A NORTH DR**
CITY-ST-ZIP **MELBOURNE FL 32934**

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
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Donald A. Pepin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-02

Date

321-254-4140

Daytime Phone #

CR2E034 (9/01)