

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90051 044 ***150.00

DOCUMENT # M84575

1. Entity Name
MOSS COMMUNICATIONS, INC.

Principal Place of Business

4710 EIGENHOWER BLVD.

STE. C4

TAMPA FL 33634

US

Mailing Address

P O BOX 2267

TAMPA FL 33601-9267

2. Principal Place of Business

4101 W. Cypress St

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

TAMPA FL

Zip
33607

Country

USA

City & State

Zip

Country

4. FEI Number

59-2895407

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MOSS, GORDON

4101 SAN PEDRO ST.

TAMPA FL 33629

7. Name and Address of New Registered Agent

Name

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

3606 DeLeon St.

City

Tampa

FL

Zip Code

33609

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 ☐ Delete
 NAME **PDST**
 STREET ADDRESS **MOSS, GORDON**
 CITY-ST-ZIP **4101 SAN PEDRO ST.**
TAMPA FL 33629

TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **SYKES, JAMES R**
 CITY-ST-ZIP **202 VIRGINIA AVE**
SEFFNER FL 33584

TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **GUY V. POTTER**
 CITY-ST-ZIP **533 So. Howard Ave. #8**
Tampa FL 33606

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 **3606 DeLeon St.**
 CITY-ST-ZIP **Tampa FL 33609**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **302 Virginia Ave**
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **V.P.**
 STREET ADDRESS **GUY V. POTTER**
 CITY-ST-ZIP **533 So. Howard Ave, #8**
TAMPA, FL 33606

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

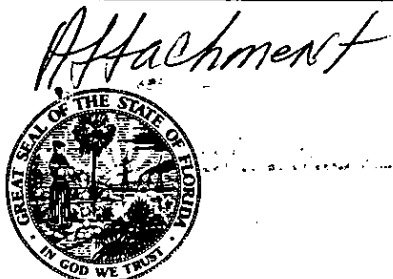
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same 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:

GORDON MOSS
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/8/02 8138771000
 Date Daytime Phone #

CR2E034 (4/02)



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

August 27, 2002

MOSS COMMUNICATIONS, INC.
P O BOX 2267
TAMPA, FL 33601-9267

SUBJECT: MOSS COMMUNICATIONS, INC.
Ref. Number: M84575

We have received your document for MOSS COMMUNICATIONS, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 702A00050108



Attachment
MOSS
COMMUNICATIONS
"TWO-WAY RADIO SOLUTIONS"

#1184575

August 13, 2002

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Hello,

I did not receive the first Annual Report form in the mail. When I looked at the form we did receive, and saw that the charge was now \$550, I was surprised.

I called your office and it was suggested that I send you this letter along with a check for \$150.

I'm sorry for the late payment and request that you waive the late charge of \$400.

Thank you for your consideration.


Gordon Moss
President