

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90132 005 ***150.00

DOCUMENT # P00000022555

1. Entity Name
PRINCESS COMMERCIAL, INC.



Principal Place of Business
906 BALL STREET
SUITE 10
PERRY GA 31069

Mailing Address
2004 TUCKER ROAD
PERRY GA 31069

2. Principal Place of Business
1122 Ball Street

3. Mailing Address

Suite, Apt. #, etc.
Suite B

Suite, Apt. #, etc.

City & State
Perry, GA

City & State

Zip
31069

Country
USA

Zip

Country

4. FEI Number **59-3654612**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

WALTERS, ELIZABETH J
221 MCKENZIE AVENUE
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ **DATE** _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	DEAL, VIC
STREET ADDRESS	208 HOOD AVENUE
CITY-ST-ZIP	FT. WALTON FL 32548
TITLE	D <input type="checkbox"/> Delete
NAME	KLEIN, HERMAN F JR
STREET ADDRESS	1590 PHOENIX BLVD., SUITE 200
CITY-ST-ZIP	COLLEGE PARK GA 30349
TITLE	D <input type="checkbox"/> Delete
NAME	DAVIS, JERRY A JR
STREET ADDRESS	P.O. BOX 14
CITY-ST-ZIP	PERRY GA 31069
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Klein, Herman F JR
STREET ADDRESS	1122 Ball Street, Ste B
CITY-ST-ZIP	Perry, GA 31069
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Herman F Klein*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/03

Date

478-988-3765

Daytime Phone #

CR2E034 (10/02)