

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUL -2 PM 1:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

01-03

1. Entity Name

P.S. Enterprises, Inc.

P 0000002974

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4465 E. Bay Dr.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Clearwater, FL

City & State

Same

4. FEI Number

59-3640994

Applied For

Not Applicable

Zip

33764

Country

Pinellas

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

James Wright

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

1201 Seminole Blvd #49

City

Largo, FL

FL

Zip Code

33770

DO NOT WRITE  
IN THIS SPACE

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

James P. Wright

James P. Wright / V. Pres

4/27/02

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)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	Pres. Rick Barber 1900 Wisteria Ct #5 Naperville, IL 60565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. Pres James Wright 1900 Wisteria Ct #5 Naperville, IL 60565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. James Wright 1900 Wisteria Ct #5 Naperville, IL 60565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treas. Rick Barber 1900 Wisteria Ct #5 Naperville, IL 60565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	300008479773-4 -10/21/02--01070--003 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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TITLE 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 on an attachment with an address with all other like empowered.

SIGNATURE:

James P. Wright

James P. Wright / V. Pres

4/27/02

(727) 798-7427

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

7/10/02

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314  
Attn. Reinstatement

James Wright  
P.S. Enterprises, Inc.  
4465 E. Bay Dr.  
Clearwater, Fl. 33764  
Ph # (727) 535-9606  
Ref. Number: P00000029721

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To whom it may concern,

On 4/27 02 I sent in my Uniform Business Report with my fee. It was returned to me because last years form was not filed. Unfortunately, I did not receive that Uniform Business form last year because your records did not show the correct address for my business. Enclosed you will find my original Uniform Business report, this years \$150 fee as well as last years \$150 fee. If you have any further questions of me you can reach me at the above number. Thank you for your attention to this matter.



James Wright  
P.S. Enterprises Inc.