

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 16, 2001 8:00 am
Secretary of State

08-16-2001 90002 014 ***150.00

DOCUMENT # P00000042329

1. Entity Name

ALL IN ONE CARPENTRY CONTRACTORS, INC.



Principal Place of Business

5630 GARFIELD STREET
 HOLLYWOOD FL 33021

Mailing Address

5630 GARFIELD STREET
 HOLLYWOOD FL 33021

2. Principal Place of Business

5630 GARFIELD ST

Suite, Apt. #, etc.

HOLLYWOOD HOUSE

City & State

HOLLYWOOD FLA

Zip

33021

Country

FLORIDA

3. Mailing Address

5630 GARFIELD ST

Suite, Apt. #, etc.

HOLLYWOOD HOUSE

City & State

HOLLYWOOD FLA

Zip

33021

Country

FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

651004764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

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.

SIGNATURE BRUCE PARENT

Bruce Parent

7-4-01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME D PARENT, BRUCE
 STREET ADDRESS 7681 SIMMS STREET
 CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE ☐ Delete
 NAME D BECKETT, JAMES
 STREET ADDRESS 7681 SIMMS STREET
 CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
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 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:

Bruce Parent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-4-01

Date

954-9834788

Daytime Phone #

CR2E034 (10/00)

7-4-01

Attachment
0000042329
A0381437

I CALLED THE NUMBER ON THE

BACK OF THE BUSINESS
REPORT. THEY TOLD ME TO RIGHT
THIS LETTER IN REGARDING I DID
NOT RECEIVED A NOTICE TO PAY
\$150⁰⁰ TO KEEP THE CORPORATION
PLEASE? I WAS SENT TO FIRST
JAMES BECKET 7681 SWIMS ST ITS
ON YOUR BUSINESS FORM HE FINAL
CHANGE ADDRESS AND SENT TO ME LATE
PLEASE I CAN NOT AFFORD
THE LATE FEE

HE IS NO LONGER OFFICER
AND HAS RESIGNED

I HAVE ONLY BIN IN

BUSINESS A FEW MONTHS

PLEASE TAKE MY CHECK
FOR 150⁰⁰

PLEASE

BRUCE PARENT 5630 GARFIELD

ST 11 N. 1000