

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 APR 18 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000049095

1. Entity Name

Daryl Krum Screens + Extras Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

552 Hickory Rd.
Suite, Apt. #, etc.

3. Mailing Address

3450 15th A.V.S.W.
Suite, Apt. #, etc.

REINSTATEMENT 01-02

DO NOT WRITE IN THIS SPACE

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

1651025928

Applied For

Not Applicable

Zip

34108

Country

U.S.

Zip

34117

Country

U.S.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Kelly A. LEE P.A.

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

2500 Airport Rd. S. #208

City

Naples

FL

34116

**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

Kelly A. Lee

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

3/5/02

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

P
Daryl Krum
552 Hickory Rd.
Naples, FL 34108

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP
Dennis Ray Krum Sr.
3450 15th A.V.S.W.
Naples, FL 34117

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
Karen Krum
3450 15th A.V.S.W.
Naples, FL 34117

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T
Daryl Krum
552 Hickory Rd.
Naples, FL 34108

TITLE

NAME

STREET ADDRESS

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**DO NOT WRITE
IN THIS SPACE**

3/5/02

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Daryl Krum

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(941) 825-9401

Daytime Phone #

CR2E0345 (12/03)