

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 14, 2001 8:00 am
Secretary of State

05-14-2001 90254 025 ***150.00

DOCUMENT # P00000051098

1. Entity Name

HIGHMARK BUILDING SERVICES, INC.

Principal Place of Business

**70901 SLOOP PLACE,APT.107
ORLANDO FL 32825**

Mailing Address

**70901 SLOOP PLACE,APT.107
ORLANDO FL 32825**

2. Principal Place of Business

7901 Sloop Place
Suite, Apt. #, etc.
107

3. Mailing Address

7901 Sloop Place
Suite, Apt. #, etc.
107

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

59-3647958

Applied For

Not Applicable

Zip

Country

32825

Orange

Zip

Country

32825

Orange

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

**YI, JONG W
70901 SLOOP PLACE,APT.107
ORLANDO FL 32825**

Name

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

7901 Sloop Place # 107

City

Orlando

FL

Zip Code

32825

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

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 **PSD** ☐ Delete
NAME **YI, JONG W**
STREET ADDRESS **70901 SLOOP PLACE,APT.107**
CITY-ST-ZIP **ORLANDO FL 32825**

TITLE ☒ Change ☐ Addition
NAME **7901 Sloop Place # 107**
STREET ADDRESS **Orlando, FL 32825**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

Yi, Jong W. Yi 4/29/01 407-895-6036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)