

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 90199 017 ***150.00

DOCUMENT # **P00000058164**
 1. Entity Name
GEORGIS FENCE + CONCRETE CO., INC.

Principal Place of Business Mailing Address

2. Principal Place of Business
1516 S.W. 22ND ST.
 Suite, Apt. #, etc.
APT - SOUTH
 City & State
FT. LAUDERDALE, FL.
 Zip
33315
 Country

3. Mailing Address
C/O FAST-TAX
 Suite, Apt. #, etc.
113 N. FEDERAL HWY.
 City & State
DANIA BEACH, FL.
 Zip
33004
 Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1031209
 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
GERALD J. ADAMS
 Street Address (P.O. Box Number is Not Acceptable)
C/O FAST-TAX
113 N. FEDERAL HWY.
 City
DANIA BEACH FL Zip Code
33004

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.

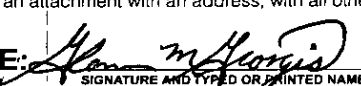
SIGNATURE  **GERALD J. ADAMS - REGISTERED AGENT** 4-26-01
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	P, V, T, S, D
STREET ADDRESS		STREET ADDRESS	GLENN M. GEORGIS
CITY-ST-ZIP		CITY-ST-ZIP	1516 S.W. 22ND STREET
			FT. LAUDERDALE, FL. 33315
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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:  **GLENN M. GEORGIS - PRESIDENT** 4-27-01 (954) 923-1040
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/00)