

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90371 011 ***150.00

DOCUMENT # P00000061884

1. Entity Name
AAA HURRICANE SOLUTIONS, INC.

Principal Place of Business

**4035 7TH STREET
 VERO BEACH FL 32968**

Mailing Address

**4035 7TH STREET
 VERO BEACH FL 32968**

2. Principal Place of Business

1254 12th Avenue
 Suite, Apt. #, etc.

3. Mailing Address

1254 12th Avenue
 Suite, Apt. #, etc.

City & State

Vero Beach, FL 32960

City & State

Vero Beach, FL 32960

4. FEI Number

59-3663641

Applied For

Not Applicable

Zip

32960

Country

USA

Zip

32960

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PIZZO, JAMES
 4035 7TH STREET
 VERO BEACH FL 32968**

7. Name and Address of New Registered Agent

Name

R.M. Jennings

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

1254 12th Avenue

City

Vero Beach

FL

Zip Code
32960

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 Pizzo **JAMES PIZZO**

4-9-02

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

TITLE ☐ Delete
P
 NAME **PIZZO, JAMES**
 STREET ADDRESS **4035 7TH STREET**
 CITY-ST-ZIP **VERO BEACH FL 32968**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
P
 NAME **R.M. Jennings**
 STREET ADDRESS **1254 12th Avenue**
 CITY-ST-ZIP **Vero Beach, FL 32960**

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

TITLE ☐ Change ☐ Addition
 NAME
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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:

R.M. Jennings **R.M. JENNINGS**

4-9-02

561-794-3834

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)