

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

**FILED**  
**Apr 21, 2002 8:00 am**  
**Secretary of State**

04-21-2002 90859 002 \*\*\*150.00

DOCUMENT # *P00000062046*

1. Entity Name

P.I.M.L., INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

12945 Vanderbilt Drive

3. Mailing Address

12945 Vanderbilt Drive

Suite, Apt. #, etc.

Apt. # 402

Suite, Apt. #, etc.

Apt. # 402

City & State

Naples, FL

City & State

Naples, FL

Zip

Country

Zip

Country

34110

Collier

34110

Collier

DO NOT WRITE IN THIS SPACE

4. FEI Number

411615013

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name **Jeffrey C. Quinn, Esq.**

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

**307 Airport Road North**

City

Naples

FL

Zip Code

34104

**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

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) ☐

**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 **President**  
NAME **Daniel J. Welch**  
STREET ADDRESS **12945 Vanderbilt Drive, #402**  
CITY-ST-ZIP **Naples, FL 34110**

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IN THIS SPACE**

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 on an attachment with an address with all other like employees.

SIGNATURE: *Daniel J. Welch*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/25/02 941 597 5792*  
Date Daytime Phone #

CR2E034B (12/01)