

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90061 025 ***150.00

DOCUMENT # P00000065398

1. Entity Name

SIX SIGMA SERVICES, INC.

Principal Place of Business

**3600 S. STATE RD. 7
 STE 12
 MIRAMAR FL 33023**

Mailing Address

**15634 SOUTHWEST 16TH COURT
 PEMBROKE PINES FL 33027**

404010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15634 SW 16th Court

3. Mailing Address

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FLORIDA

City & State

PEMBROKE PINES, FLORIDA

4. FEI Number

65-1025642

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRUMMOND, ROBERT

15634 SW 162 COURT

PEMBROKE PINES FL 33027

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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]

ROBERT A. DRUMMOND PRESIDENT

April 29, 2002

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

(NOTE: Registered Agent signature required when re/instating)

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 **PTD** ☐ Delete
 NAME **DRUMMOND, ROBERT**
 STREET ADDRESS **15634 SOUTHWEST 16TH COURT**
 CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE **VSD** ☒ Delete
 NAME **GORDON, RICHARD**
 STREET ADDRESS **15634 SOUTHWEST 16TH COURT**
 CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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 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:

[Signature] **ROBERT A. DRUMMOND**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (President)

Date

4/29/02 (954) 801-3363

Daytime Phone #

CR2E034 (9/01)