

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2001 8:00 am
Secretary of State

06-22-2001 90002 007 ***150.00

DOCUMENT # P00000090369

1. Entity Name

BEFORE YOU BY HOME INSPECTION, INC.

Principal Place of Business

Mailing Address

150 WARREN CIR.
 JACKSONVILLE FL 32259

150 WARREN CIR.
 JACKSONVILLE FL 32259

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32257

USA

4. FEI Number

59-3677082

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

AGUIRRE, FRANKLIN
 150 WARREN CIR.
 JACKSONVILLE FL 32259

Name

(reptable)

City

FL

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGUIRRE, FRANKLIN 150 WARREN CIR. JACKSONVILLE FL 32259 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 a 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6.1801

CR2034 (10/00)

Attachment Document # 9376
0000000 90369

P.O. Box 24094
Jacksonville, FL 32257

Before You Buy Home Inspection, Inc.

June 28, 2001

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I am writing to request an abatement of penalty for late filing of my annual corporate renewal. My address had changed and therefore I did not receive the annual renewal form timely. My new address is P.O. Box 24094, Jacksonville, FL 32257.

Please update your records so that this will not happen in the future. Also, I was unaware of the Florida street address requirement for the registered agent. Please keep the registered agent's street address as it was at 150 Warren Circle, Jacksonville, FL 32259.

Respectfully Submitted,



Franklin Aguirre

Franklin Aguirre
President

ENC: 1

The best home inspections