

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90349 022 ***150.00

039073 AV

DOCUMENT # P00000091546

1. Entity Name

SURE-FLOW PLUMBING CORPORATION

Principal Place of Business

Mailing Address

**8 BAMBOO LANE
 JUPITER FL 33458**

**8 BAMBOO LANE
 JUPITER FL 33458**



2. Principal Place of Business

3. Mailing Address

8 Bamboo Lane

8 Bamboo Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Jupiter, FL

Jupiter, FL

City & State

City & State

33458 USA

33458 USA

Zip

Country

Zip

Country

4. FEI Number

65-1042457

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KUSCHEL, DAVID K ESQ
 27 PENNOCK LANE STE 204
 JUPITER FL 33458**

Name

Ruschel, David K. Esq.

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

27 Pennock Lane Ste 204

City

Jupiter FL

FL

Zip Code

33458

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D GRAY, JAMES S**
 STREET ADDRESS **8 BAMBOO LANE**
 CITY-ST-ZIP **JUPITER FL 33458**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/02

561-743-3722

Date

Daytime Phone #

CR2E034 (9/01)