

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # *P00000094739*

1. Entity Name
Genesis Engineering and Constructors Corp.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 SEP -3 PM 3:13

DO NOT WRITE IN THIS SPACE

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****158.75 ****158.75

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2. Principal Place of Business

2709 Allen RD

3. Mailing Address

2709 Allen RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee FL.

City & State

Tallahassee FL.

4. FEI Number

593678822

Applied For

Not Applicable

Zip

32317

Country

US

Zip

32317

Country

US

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

EDWARD C. FREEMAN

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

901 Grove/land Hills DR.

City

Tallahassee

FL

Zip Code

32317

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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
NAME
STREET ADDRESS
CITY-ST-ZIP
*EDWARD C. FREEMAN
2709 Allen RD.
Tallahassee FL 32312*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP
*Ducques Yorker
2709 Allen RD.
Tallahassee FL 32312*

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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 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 fee empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sept 103/02

CR2E034B (12/01)

Sept 103/02

To whom it may concern I
"ED FREEMAN" was not notified
concerning our annual report
please waive the late fees.

My Home Address is
961 Groveland Hills Dr,
Tallahassee FL 32317

Thank you

