

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 20, 2003 8:00 am**  
**Secretary of State**

08-20-2003 90050 025 \*\*\*150.00

0095630 AV

**DOCUMENT # P00000099809**

1. Entity Name  
**WATKINS ENTERPRISES, INC.**



Principal Place of Business  
**11315 N. ARMNIA AVE.**  
**TAMPA FL 33612**

Mailing Address  
**11315 N. ARMNIA AVE.**  
**TAMPA FL 33612**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3684074**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WATKINS, JERRY V**  
**11315 N. ARMNIA AVE.**  
**TAMPA FL 33612**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**WATKINS, JERRY V**  
**11315 N. ARMNIA AVE.**  
**TAMPA FL 33612** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**WATKINS, VIRGINIA S**  
**11315 N. ARMNIA AVE.**  
**TAMPA FL 33612** ☐ Delete

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

TITLE  
NAME  
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CITY-ST-ZIP  
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☐ Change ☐ Addition

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*J. Watkins, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-15-03**

Date

**813-932-8405**

Daytime Phone #

CR2E034 (4/03)

ATTACHMENT  
#P00000099809

WATKINS ENTERPRISES, INC.

11315 N. Armenia Ave.

Tampa, Florida. 33612

Ph: 813-932-8405 Fax: 813-932-6575

80139226

August 15, 2003  
Divisions of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Fl. 32302-1500

Re: Document # P00000099809

Dear Sir:

This letter is to inform you that Watkins Enterprises, Inc. did not receive the prior notice.  
We are enclosing the original \$150.00 filing fee along with the 2003 Uniform Business  
Report. We apologize for any inconvenience this may have caused you.

Respectfully,



Jerry V. Watkins, President  
Watkins Enterprises, Inc.