

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90204 032 ***150.00

DOCUMENT # P00000100492

1. Entity Name
FLORICK INTERNATIONAL CORPORATION



Principal Place of Business
212 SWEET GUM WAY
LONGWOOD FL 32779

Mailing Address
212 SWEET GUM WAY
LONGWOOD FL 32779

2. Principal Place of Business
540 N. Hwy 434
Suite, Apt. #, etc.
BLDG 109

3. Mailing Address
540 N. Hwy 434
Suite, Apt. #, etc.
BLDG 109

City & State
ALTAMONTE SPRINGS FL

City & State
ALTAMONTE SPRINGS FL

Zip
32712

Country
US

Zip
32712

Country
US

4. FEI Number **59-3678449**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

TANNER, RICHARD M
500 GOLF TEE LANE, APT. 124
LONGWOOD FL 32779

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. 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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ **Delete**
NAME **TANNER, RICHARD M**
STREET ADDRESS **212 SWEET GUM WAY**
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE **D** ☐ **Delete**
NAME **TANNER, FLORENCE**
STREET ADDRESS **212 SWEET GUM WAY**
CITY-ST-ZIP **LONGWOOD FL 32779**

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

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

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS **500 GOLFTEE LANE #124**
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS **500 GOLFTEE LANE #124**
CITY-ST-ZIP

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

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

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

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: *[Signature]* **SIGNATURE RICHARD M TANNER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-03 **407 869 7220**
Date Daytime Phone #

CR2E034 (10/02)