

2001 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 04, 2001 8:00 am
Secretary of State

05-14-2001 90259 036 ***150.00

DOCUMENT # P00000115203

1. Entity Name

REMCO SITE DEVELOPMENT OF ORLANDO, INC.

Principal Place of Business

Mailing Address

1227 28TH STREET
 ORLANDO FL 32805

1227 28TH STREET
 ORLANDO FL 32805

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3693342

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

COOPER, MARK O ESQ.
 200 EAST ROBINSON STREET
 SUITE 865
 ORLANDO FL 32801

Name

MARK O. COOPER

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

@2699 Lee Rd., Suite 320

City

Winter Park

FL

Zip Code

32789

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]

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

(NOTE: Registered Agent signature required when resigning)

DATE

2-12-01

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

TITLE NAME ☐ Delete

PD MCDANIEL, RUSSELL E

STREET ADDRESS 1227 28TH STREET

CITY-ST-ZIP ORLANDO FL 32805

TITLE NAME ☐ Delete

VSD MORADI, MEHRDAD

STREET ADDRESS 1227 28TH STREET

CITY-ST-ZIP ORLANDO FL 32805

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

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CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

Daytime Phone #

CR2E034 (10/00)