

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90907 009 ***150.00

DOCUMENT # P00000115391

1. Entity Name

GET INCORPORATED

Principal Place of Business

1808 LANDING DR., APT. E
 SANFORD FL 32771

Mailing Address

1808 LANDING DR., APT. E
 SANFORD FL 32771

2. Principal Place of Business

490 N SUNDANCE DR

3. Mailing Address

490 N SUNDANCE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LK MARY FL

City & State

LK MARY FL

4. FEI Number

59-3696171

Applied For

Not Applicable

Zip

Country

32746 USA

Zip

Country

32746 USA

5. Certificate of Status Desired

☐ \$8.75-Additional Fee Required

6. Name and Address of Current Registered Agent

TORO, RUBEN D
 7345 SAND LAKE DR., STE. 204
 ORLANDO FL 32819

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.

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

TITLE DPST
 NAME RODRIGUES, NEWTON G JR
 STREET ADDRESS 1808 LANDING DR., APT. E
 CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPST ☒ Change ☐ Addition
 NAME RODRIGUES JR, NEWTON G
 STREET ADDRESS 490 N SUNDANCE DR
 CITY-ST-ZIP LK-MARY FL 32746

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

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

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

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NEWTON G RODRIGUES JR

4-4-2002

Daytime Phone #

CR2E034 (9/01)