

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90013 004 ***150.00

DOCUMENT # P01000006433

1. Entity Name

MINORITY BUILDERS CORPORATION ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4456 6th AVE E

3. Mailing Address

SAME

Suite, Apt. #, etc.

BRADENTON FL.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

6510 72711

Applied For

Not Applicable

Zip

34208

Country

MANATEE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

NEAL WILLIAMS SR.

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

4456 6th AVE EAST

City

BRADENTON

FL

Zip Code

34208

**DO NOT WRITE
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
President
Neal Williams SR.
4456 6th AVE BRADENTON 34208

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Philip McPherson sec/treasurer
1008 26th St. East
PALMETTO, FL 34220

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CR2E034B (12/01)

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 like empowered.

SIGNATURE: NEAL WILLIAMS SR. Neal Williams SR. 4/18/02 941-745-2214

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #