

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90293 027 ***150.00

DOCUMENT # P01000012956

1. Entity Name
GUY'S UNDERGROUND INC.



Principal Place of Business
**2733 FAIRBROOK ST
NORTH PORT FL 34287**

Mailing Address
**2733 FAIRBROOK ST
NORTH PORT FL 34287**



2. Principal Place of Business

3. Mailing Address

3178 Albenga Ln
Suite, Apt. #, etc.

3178 Albenga Ln
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
North Port, FL

City & State
North Port, FL

4. FEI Number **59-3698826**

Applied For
☐ Not Applicable

Zip Country
34286 Sarasota

Zip Country
34286 Sarasota

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

**JENKINS, DONALD F JR
2733 FAIRBROOK ST
NORTH PORT FL 34287**

Name **Donald F. Jenkins Jr.**
Street Address (P.O. Box Number is Not Acceptable)
3178 Albenga Ln
City **North Port** FL **34286**

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 **Donald F. Jenkins Jr.**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/19/2003
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 Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **JENKINS, DONALD F JR**
STREET ADDRESS **2733 FAIRBROOK ST**
CITY-ST-ZIP **NORTH PORT FL 34287**

TITLE **P** ☒ Change ☐ Addition
NAME **Jenkins, Donald Jr**
STREET ADDRESS **3178 Albenga Ln**
CITY-ST-ZIP **North Port, FL 34286**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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: **Donald F. Jenkins Jr.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/2003 941-429-2000
Date Daytime Phone #

CR2E034 (10/02)