

H01000019696

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000019570

1. Entity Name

Greater Caribbean Appraisal Services Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 1224 A. Flagler Avenue

Suite, Apt. #, etc.

3. Mailing Address

25 Suite, Apt. #, etc.

City & State

23 Key West FL

27 City & State

29 Zip

County

Zip

24 33040

County

25 Monroe

4. FEI Number

65-1076754

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

Corporate Creations Network Inc.
941 Fourth Street #200
Miami Beach, FL 33139

81

82

83

84

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 agent, or both, in the State of Florida

SIGNATURE

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

by V. C. ... assistant secretary

(NOTE: Registered Agent signature required when changing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirements and elects to do so ☐
(See criteria on back)FILE NOW IN FEB IS \$150.00
After MAY 1, 2000 Fee will be \$500.00
Make Check Payable to Department of State10. 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 Director ☐ DELETE
NAME Jeffrey R. Nienaber
STREET ADDRESS 12224 A. Flagler Avenue
CITY-ST-ZIP Key West, FL 33040TITLE Director ☐ DELETE
NAME Chris A. Greene
STREET ADDRESS 12224 A. Flagler Avenue
CITY-ST-ZIP Key West, FL 33040TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
300008816613
11/06/02--01005--023 **150.002.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. I do 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 annual report or supplemental annual 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, or on attachment with address.

SIGNATURE

Jeffrey R. Nienaber, Director

10-30-02

305-923-1902

SIGNATURE, TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Section Page #

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Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Greater Caribbean Appraisal Services, Inc.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. 150.00 check payable to Florida Department of State

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.