

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 02, 2003 8:00 am**  
**Secretary of State**

0421428 AV

**DOCUMENT # P01000044239**

1. Entity Name  
**REMOVALS OF PALM BEACH, INC.**



06-02-2003 90191 001 \*\*\*150.00

Principal Place of Business  
**2044 SOUTH 7TH COURT  
LAKE WORTH FL 33461**

Mailing Address  
**2044 SOUTH 7TH COURT  
LAKE WORTH FL 33461**



2. Principal Place of Business  
**421 Parkway Court**  
Suite, Apt. #, etc.

3. Mailing Address  
**Po Box 926**  
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
**Green Acres, FL**

City & State  
**Boynton Beach, FL**

4. FEI Number **65-1104654**

Applied For  
Not Applicable

Zip Country  
**33413 USA**

Zip Country  
**33425 USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**WARREN, JAMES B  
421 PARKWAY COURT  
WEST PALM BEACH FL 33413**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE James B. Warren

4-30-2003

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

(NOTE: Registered Agent signature required when reinstating)

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 **DCEO**  Delete  
NAME **WARREN, JAMES B**  
STREET ADDRESS **P.O. BOX 853**  
CITY-ST-ZIP **BOYNTON BCH FL 33425**

TITLE **DCEO**  Change  Addition  
NAME **James B. Warren**  
STREET ADDRESS **Po Box 926**  
CITY-ST-ZIP **Boynton Beach, FL 33425**

TITLE **DCEO**  Delete  
NAME **BACH, JENNIFER L**  
STREET ADDRESS **5048 LANTANA RD APT 5906**  
CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
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CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: James B. Warren

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-2003

Date

561 308-5372

Daytime Phone #

CR2E034 (10/02)