

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

DOCUMENT # **PO1000047468**

1. Entity Name

165 Services, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
501 S Dakota Ave

Suite, Apt. #, etc.

3. Mailing Address
Same

Suite, Apt. #, etc.

City & State
Tampa, FL

City & State

Zip
33606

Country
USA

Zip

Country

4. FEI Number
59-3721519

Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

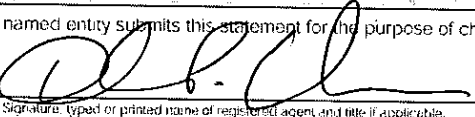
Name **Thomas McNamara, PA**

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

2909 Bay to Bay Blvd Ste 309

City **Tampa** **FL** Zip Code
33629

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.

Thomas P McNamara

9/10/02

(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 - Robert Magnan 501 S Dakota Ave Tampa, FL 33606	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director - Lloyd McGowen 501 S Dakota Ave Tampa, FL 33606	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director - Carl Morsbach 501 S Dakota Ave Tampa, FL 33606	TITLE NAME STREET ADDRESS CITY- ST- ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director - Dale Smith 501 S Dakota Ave Tampa, FL 33606	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Director - Richard Sean Manning 501 S Dakota Ave Tampa, FL 33606	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/02

Date

Examine Phone #

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90129 001 ***550.00

980100

DO NOT WRITE IN THIS SPACE