

FILED

Aug 29, 2002 8:00 am
Secretary of State

08-19-2002 90001 046 ***550.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # **P01000053615** ✓
1. Entity Name
Verax Enterprises Inc.**DO NOT WRITE IN THIS SPACE**2. Principal Place of Business
5770 LEON TYSON RD
Suite, Apt. #, etc.3. Mailing Address
5770 LEON TYSON RD
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ST CLOUD FL
Zip
34771City & State
ST CLOUD FL
Zip
347714. FEI Number
54-372-2339
Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
GARY R TIMBRELL
Street Address (P.O. Box Number is Not Acceptable)
5770 LEON TYSON RD.
ST CLOUD FL
City
34771

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 life 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) ☒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
George M. Kissinger
2508 MAUI CIRCLE
KISSIMMEE FL 34771TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vice President
GARY R TIMBRELL
5770 LEON TYSON RD
ST CLOUD FL 34771TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Secretary
Kelly A Timbrell
5770 LEON TYSON RD
ST CLOUD FL 34771TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
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CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

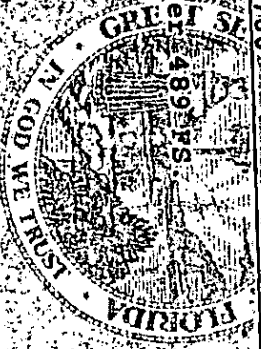
Date

Daytime Phone #

CR2E0348 (12/01)

Attachment

98614
pol 000053615

AC# 0257981		STATE OF FLORIDA	
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION		SEC# 0110500513	
CONST. INDUSTRY LICENSING BOARD			
DATE	BATCH NUMBER	LICENSE NBR	THE ST.
11/05/2001	01011381	CG - C058780	
The GENERAL CONTRACTOR Named below IS CERTIFIED Under the provisions of Chapter 489, FS Expiration date: AUG 31, 2002			
			
KISSINGER, GEORGE MEADE IV VERAX ENTERPRISES, INC. 5770 LEON TYSON RD SAINT CLOUD FL 34771			
JEB BUSH GOVERNOR		KIM BINKLEY SEYER SECRETARY	
DISPLAY AS REQUIRED BY LAW			