

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90111 034 ***150.00

DOCUMENT # P01000055882

1. Entity Name
SYMERON, INC.



Principal Place of Business
2637 MCCORMICK DR.
CLEARWATER FL 33759

Mailing Address
2637 MCCORMICK DR.
CLEARWATER FL 33759



2. Principal Place of Business

1300 N. Westshore Blvd

3. Mailing Address

1300 N. Westshore Blvd.

Suite, Apt., etc.

Suite, Apt., etc.

City & State

City & State

Tampa, FL

Tampa, FL

Zip

Country

Zip

Country

33607 USA

33607 USA

4. FEI Number

59-3727586

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

THURMAN, MARCY J
2637 MCCORMICK DR.
CLEARWATER FL 33759

7. Name and Address of New Registered Agent

Name Law Offices of Christopher Calkin
Street Address (P.O. Box Number is Not Acceptable) 1715 N. Westshore Blvd.
City Tampa, **FL** **Zip Code** 33607

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/03

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

TITLE PD ☐ Delete
NAME COATES, BOBBY
STREET ADDRESS 2637 MCCORMICK DR.
CITY-ST-ZIP CLEARWATER FL 33759

TITLE VPS ☒ Delete
NAME COATES, DEBORAH
STREET ADDRESS 2637 MCCORMICK DR.
CITY-ST-ZIP CLEARWATER FL 33759

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Coates Bobby
STREET ADDRESS 1300 N. Westshore Blvd - Ste 100
CITY-ST-ZIP Tampa, FL 33607

TITLE VPS ☒ Change ☐ Addition
NAME Coates Deborah
STREET ADDRESS 1300 N. Westshore Blvd - Ste 100
CITY-ST-ZIP Tampa, FL 33607

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

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

TITLE ☐ Change ☐ Addition
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, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03

(813) 490-8500

Date

Daytime Phone #

CR2E034 (10/02)