

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State

07-25-2002 90123 031 ***150.00

DOCUMENT # P01000079915

1. Entity Name
GULFSIDE SHUTTERS, INC.

Principal Place of Business
 1274 SEDEVA CIRCLE NORTH
 CLEARWATER FL 33755

Mailing Address
 1274 SEDEVA CIRCLE NORTH
 CLEARWATER FL 33755

2. Principal Place of Business
716 Wesley Ave
 Suite, Apt. #, etc. **18**

3. Mailing Address
Same
 Suite, Apt. #, etc.

City & State
Tarpon Springs, FL
 Zip **34689** Country **U.S.**

City & State
 Zip Country

4. FEI Number
593739640

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LAKE, BRIAN C
 1274 SEDEVA CIRCLE NORTH
 CLEARWATER FL 33755

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

Signature, typed or printed name of registered agent and title 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) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAKE, BRIAN C 1274 SEDEVA CIRCLE NORTH CLEARWATER FL 33755	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (4/02)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Brian Lake
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **7/22/02**

Attachment
#P01000079915
B0132119



GULFSIDE SHUTTERS INC

7/17/02

To, The Division of Corporations,

I have only received one UBR report for 2002. Being that
This is the only one I have received, I'm asking you to
wave the penalty charge. Enclosed is a check for \$150.00,
thank you for your understanding.

Sincerely, Daniel Hobert / Brian Lake

Primary Business Address
716 Wesley Ave Suite 18
Tarpon Springs, FL
34689

Phone: 727-938-3436
Fax: 727-937-3424