

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

0006375 AV

DOCUMENT # P01000097164

1. Entity Name
PBC CONSULTING INC.

04-08-2002 90074 024 ***150.00

Principal Place of Business Mailing Address
295 GLENEAGLES DRIVE **295 GLENEAGLES DRIVE**
ORANGE PARK FL 32073 **ORANGE PARK FL 32073**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-3752284** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHEBI, PAUL B
295 GLENEAGLES DRIVE
ORANGE PARK FL 32073

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 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	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEBI, PAUL B	NAME	
STREET ADDRESS	295 GLENEAGLES DRIVE	STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL 32073	CITY-ST-ZIP	

THE STATUS OF THIS CORPORATION IS CURRENT BUT "INACTIVE" WILL NOTIFY WHEN/IF REACTIVATED. NO REVENUES NOR RETURNS WILL BE SUBMITTED UNTIL STATUS IS REACTIVATED
Paul Debel 3/28/02

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: *Paul Debel* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **3/28/02 9042723407** **Daytime Phone #**

CR2E034 (9/01)