2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000133896

1. Entity Name

HEEUBANKS CONTRACT MFG. COMPANY

FILED
03 MAR 31 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2980 NW 24 AVE FORT LAUDERDALE FL 33311	2980 NW 24 AVE FORT LAUDERDALE FL 33311

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
500 S DIXIE HWY E. Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: POMPANO BCH. FL	City & State
Zip: 33060 Country: USA	Zip Country

4. FEI Number: 61-1433610 ☐ Applied For ☐ Not Applicable

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
EUBANKS, HAROLD E SR. 2980 NW 24 AVE FORT LAUDERDALE FL 33311	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: Harold E. Eubanks HAROLD E. EUBANKS SR. 3-3-03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE $50.00
After May 1, 2003 Fee $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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT + DIRECTOR HAROLD E. EUBANKS SR. 2980 N.W. 24 AVE. FT. LAUDERDALE FL. 33311 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 3-10-03 90783 025 $150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR HAROLD E. EUBANKS II 2980 NW 24 AVE. FT. LAUDERDALE FL. 33311 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR CATHERINE W. EUBANKS 2980 NW 24th AVE. FT. LAUDERDALE FL 33311 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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, with all other like empowered.

954 783 4434

SIGNATURE: Harold E Eubanks 3-3-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #