

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 23, 2004 8:00 am
Secretary of State

07-19-2004 90018 007 ***150.00

DOCUMENT #

1. Entity Name

Keovithoune Vorachack masonry inc
PO3000132118



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2047 Hollywood Dr.
Suite, Apt. #, etc.

3. Mailing Address

2047 Hollywood Dr.
Suite, Apt. #, etc.

66432398

DO NOT WRITE IN THIS SPACE

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

52-2419904

Applied For

Not Applicable

Zip

32505

Country

USA

Zip

32505

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Keovithoune Vorachack

Street Address (P.O. Box Number is Not Acceptable)

2047 Hollywood Dr.

City

Pensacola

FL

Zip Code

32505

**DO NOT WRITE
IN THIS SPACE**

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY-ST-ZIP

P
Keovithoune Vorachack
2047 Hollywood Dr.
Pensacola FL 32505

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/04

Date

(850) 438-6266

Daytime Phone #

CR2E034B (12/02)

Attachment



Division of Corporations

66432398

Receipt

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

Document Number: P03000132118

Tracking Number: 700034142197

The charge for your Annual Report is
\$150.00

If you want to review your document, use the browser back button to return to page 1 of the data entry. Use the browser forward button to come back to this page.

If you need to make a change, you must return to the Document Number page and start over. A new tracking number will be assigned.

If you have any questions, please contact our help desk at (850) 245-6939.

To proceed to pay for the Annual Report, press the CONTINUE button below.

By pressing the CONTINUE button, your Annual Report will be placed in processing and no additional Annual Reports may be filed for this corporation until this one is processed.

Continue

Sunbiz Home Page

Public Access Help

(850) 438-7266

we filed this report when we was supposed to. I call the number listed here and they said that somehow it didn't all process. He said not to pay the \$400. If I need to pay the \$400 please notify me so I can do so.

4/27/2004