

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90020 026 ***150.00

DOCUMENT # P92000003365

1. Entity Name

B&V VENTURES, INC.

Principal Place of Business

Mailing Address

BARDMOOR VILLAGE
10801 STARKEY RD. STE. 106
LARGO FL 33777
US

BARDMOOR VILLAGE
10801 STARKEY RD. STE. 106
LARGO FL 33777-1160

80023375



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

59-3155684

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

ROBERT E. JULIEN
1001 STARKEY RD
#465
LARGO FL 33771

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

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 \$150.00
After MAY 1, 2000 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	TITLE	
NAME	JULIEN ROBERT, E	NAME	
STREET ADDRESS	1001 STARKEY RD, 465	STREET ADDRESS	
CITY-ST-ZIP	LARGO FL 33771	CITY-ST-ZIP	
TITLE	VP	TITLE	
NAME	JULIEN, VINCE E	NAME	
STREET ADDRESS	18716 63RD AVE E	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34202	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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:

Robert E Julien
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/00 *727/397-9010*
Date Daytime Phone #

CR2E034 (9/99)