

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90019 009 \*\*\*150.00

**DOCUMENT # P93000022738**

1. Entity Name  
**PHUNG'S P&L, INC.**

Principal Place of Business 7660 STARK AVENUE PENSACOLA FL 32514 US	Mailing Address 7660 STARK AVENUE PENSACOLA FL 32514 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number **59-3170140**

Applied For	
Not Applicable	

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



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**GREENING, PHUNG**  
**7660 STARK AVENUE**  
**PAENSACOLA FL 32514**

**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.

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.  (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>GREENIG, PHUNG</b>	
STREET ADDRESS	<b>7660 STARK AVENUE</b>	
CITY-ST-ZIP	<b>PENSACOLA FL 32514</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: *[Signature]* **SIGNATURE REQUIRED** 7-10-2000 Date Daytime Phone # \_\_\_\_\_

CR2E034 (5/00)

BRUNER ACCOUNTING SERVICE  
2031 LANSING DRIVE  
PENSACOLA, FL 32504

ATTACHMENT  
P93000022738  
DW78892

JULY 11, 2000

KATHERINE HARRIS,  
SECRETARY OF STATE  
STATE OF FLORIDA

RE: 2000 UNIFORM BUSINESS REPORT (UBR) # P93000022738  
PHUNG'S P&L, INC. 59-3170140

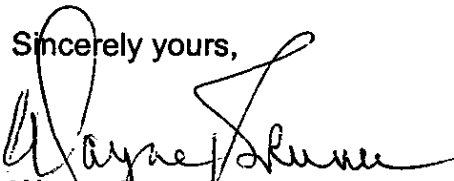
Dear Madam Secretary,

This to acknowledge receipt of the Second Notice on the above captioned account and the conversation with a representative in your office to send this letter of explanation with the return and check.

Again, we have never received the original report and request that the increased filing fee be reduced to the original fee of \$150.00 - as is the amount on the attached check.

Thank you for your consideration on our request and if you need any additional information on this matter, please contact me at (850) 476-8425.

Sincerely yours,



Wayne Bruner