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## 2001 UNIFORM BUSIŅESS REPORT (UBR)

## Mar 09, 2001 8:00 am DOCUMENT # P93000044216 **Secretary of State** MTA INDUSTRIAL PAINTING CORPORATION 03-09-2001 90500 033 \*\*\*158.75 Principal Place of Business Mailing Address 1055 N PINELLAS AVE 1055 N PINELLAS AVE TARPON SPRINGS FL 34689 D0023868 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3188505 Not Applicable Country Zip Zip \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SAROUKOS, MARGARET Street Address (P.O. Box Number is Not Acceptable) 1055 N PINELLAS AVE TARPON SPRINGS FL 34689 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) $\Box$ Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition ☐ Change **PSD** TITLE Delete TITLE NAME SAROUKOS, GEORGE NAME STREET ADDRESS STREET ADDRESS 1055 N PINELLAS AVE CITY-ST-ZIP CITY-ST-7/P TARPON SPRINGS FL 34689 ☐ Change ☐ Addition TITLE Delete TITLE SAROUKOS, MARGARET <del>SARDUKO</del>S, MARGARET NAME NAME STREET ADDRESS STREET ADDRESS 1055 N PINELLAS AVE CITY-ST-7IP CITY-ST-ZIP" TARPON SPRINGS FL 34689 ☐ Delete SAROUKOS, THEOFILOS 1055 N. PINELLAS AUE ☐ Change **Addition** TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS TARPON SPRINGS, FI 34689 CITY-ST-ZIP CITY-ST-ZIP ☐ Change **Addition** TITLE ☐ Delete TITLE SAROUKOS, ANTHONY 1055 N. PINELLES AVE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS, FI 34689 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/01

727-934-8600