

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90028 047 ***150.00

DOCUMENT # P93000056140

1. Entity Name

S.V.P. MAINTENANCE & REPAIR INC.

Principal Place of Business

Mailing Address

9043 108TH AVENUE NORTH
 LARGO FL 33777
 US

9043 108TH AVENUE NORTH
 LARGO FL 33777-1122
 US

2. Principal Place of Business

8380 Ulmerton Rd

3. Mailing Address

9043 108 ave N

Suite, Apt. #, etc.

334

Suite, Apt. #, etc.

City & State

LARGO

FL

City & State

Largo

FL

4. FEI Number

59-3194015

Applied F

Not Appli

Zip

33773

Country

PINELLAS

Zip

33777

Country

PINELLAS

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

PRATHER, STEPHEN F
 9043 108TH AVENUE NORTH
 LARGO FL 34647

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

Stephen F Prather

STEPHEN F PRATHER

2/10/2000

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 M
 Added to F

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE D ☐ Delete
 NAME PRATHER, STEPHEN F
 STREET ADDRESS 9043 108TH AVENUE NORTH
 CITY-ST-ZIP LARGO FL 34647

TITLE ☐ Change ☐
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME PRATHER, V L
 STREET ADDRESS 9043 108 AVE. N
 CITY-ST-ZIP LARGO FL 34647

TITLE ☐ Change ☐
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S ☐ Delete
 NAME PRATHER, DAVE
 STREET ADDRESS 5991 67 AVE. N.
 CITY-ST-ZIP PIN PK FL 33781

TITLE ☐ Change ☐
 NAME
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 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐
 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 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 I changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen F Prather

STEPHEN F PRATHER

2/10/2000 727 39

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #