

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000085500

1. Entity Name

SURFACE CENTER, INC.

FILED
Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90017 009 ***150.00

Principal Place of Business

Mailing Address

217-A FALKENBURG RD., N.
TAMPA FL 33619-0911

13910 N. DALE MABRY HWY., SUITE 1
TAMPA FL 33618-2440

2. Principal Place of Business

3. Mailing Address

2007 Wood Court

3355 Bears Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste #4

City & State
Plant City, Florida

City & State
Tampa, Florida

Zip Country

Zip Country

33567

33618



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3211975

Applied For
Not Applicable

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

SANDERS, WALTER
13910 N. DALE MABRY HIGHWAY
SUITE ONE
TAMPA FL 33618

Name Walter Sanders

Street Address (P.O. Box Number is Not Acceptable)
3355 Bears Avenue

City Tampa FL Zip Code 33618

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

Walter Sanders

Walter Sanders

3/3/00

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

TITLE D ☐ Delete
NAME HOCH, KIM
STREET ADDRESS 7524 RICHLAND ST
CITY-ST-ZIP WESLEY CHAPEL FL

TITLE D ☒ Change ☐ Addition
NAME Hoch, Kim
STREET ADDRESS 802 mendoza Rd.
CITY-ST-ZIP Plant City, FL 33566

TITLE D ☐ Delete
NAME BARBEE, WILLIAM R
STREET ADDRESS 3507 SPRINGVILLE DRIVE
CITY-ST-ZIP VALRICO FL 33594

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Hoch, Tim
STREET ADDRESS 802 mendoza Rd.
CITY-ST-ZIP Plant City, FL 33566

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ 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:

Kim Ball

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6 Mar 00 813/759-6513

Date

Daytime Phone #

CR2F034 (9/99)