

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000010916

1. Entity Name

FACTORY ONE BLINDS, INC.

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90090 008 ***150.00

Principal Place of Business

6500 14TH STREET WEST
STE. B
BRADENTON FL 34207

Mailing Address

6500 14TH STREET WEST
STE. B
BRADENTON FL 34207-5833

2. Principal Place of Business

5758 FORESTER POND AVE

3. Mailing Address

5758 FORESTER POND AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0465646

Applied For

Not Applicable

Zip

34243

Country

US

Zip

34243

Country

US

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

MORAN, MICHAEL
1800 SECOND STREET
STE. 850
SARASOTA FL 34236

Name

MICHAEL T STARR

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

5758 FORESTER POND AVE

City

SARASOTA

FL

Zip Code

34243

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

Michael T. Starr

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/17/00

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 VD ☐ Delete
NAME STARR, MICHAEL T
STREET ADDRESS 6500 14TH STREET WEST STE. B
CITY-ST-ZIP BRADENTON FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5758 FORESTER POND AVE
CITY-ST-ZIP SARASOTA, FL 34243

TITLE PD ☒ Delete
NAME STARR, SUZANNE
STREET ADDRESS 6500 14TH STREET WEST STE. B
CITY-ST-ZIP BRADENTON FL

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

TITLE VD ☒ Delete
NAME STARR, NANCY A.
STREET ADDRESS 6500 14TH ST. WEST
CITY-ST-ZIP BRADENTON FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
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: *Michael T. Starr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL T. STARR

Date

4/17/00

Daytime Phone #

CR2E034 (9/99)