

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 SEP 18 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000039404**

1. Entity Name **Pullen Enterprises**
FEI 593245714

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **Pullen Enterprises** 3. Mailing Address **9020 SHARON DRIVE**

Suite, Apt. #, etc. **9020 SHARON DRIVE** Suite, Apt. #, etc.

City & State **New port Richey FL** City & State **New port Richey FL**

Zip **34654** Country **USA** Zip **34654** Country **USA**

4. FEI Number **593245714**

Applied For
Not Applicable

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

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7. Name and Address of Current Registered Agent

Name **MARK Pullen**

Street Address (P.O. Box Number is Not Acceptable) **9020 SHARON DRIVE**

City **New port Richey FL** Zip Code **34654**

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE **P**
NAME **MARK Pullen**
STREET ADDRESS **9020 SHARON DRIVE**
CITY-ST-ZIP **NEW PORT RICHEY 34654**

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****150.00 ****150.00

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK Pullen

9.11.02 7278190295

Date

Daytime Phone #

CR2E034B (12/01)

Mark Pullen SS# 590-11-9138
Pullen Enterprises F.E.I.# 593245714
9020 Sharon Dr.
New Port Richey 34654
Phone - 727-8565892 Sept. 11, 2002

To whom it may concern,

Where do I start to explain my situation at this time.

I am going thru a nasty divorce and I was under the impression that my wife had taken care of the U.B.R. report some time ago, now I find out that not only did she keep all my mail from me she did not send in the U.B.R. report, so that is why I am sending it now plus the check for \$150.00, if you need any more information or additional funds please call or write me at the above phone# or address. Any help you could possibly give me would be greatly appreciated.

I only found out this morning that my Corp. would be dissolved this Fri. if this information, letter & check did not reach you in time, so therefore I am sending it over night