

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000063355

1. Entity Name

FLORIDA MAT RENTAL, INC.

FILED

00 JAN 19 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
3850 N. CAUSEWAY BLVD., SUITE 1770 3850 N. CAUSEWAY BLVD., SUITE 1770
METAIRIE, JEFFERSON PARISH LA 70002 METAIRIE, JEFFERSON PARISH LA 70002-8181

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 72-1277728

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

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. ☐

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 P ☐ Delete
NAME LATIOLIAS, RONALD
STREET ADDRESS 3850 N. CAUSEWAY BLVD., SUITE 1770
CITY-ST-ZIP METAIRIE LA 70002

TITLE VP ☐ Delete
NAME BALLANTINE, WM. THOMAS
STREET ADDRESS 3850 N. CAUSEWAY BLVD., SUITE 1770
CITY-ST-ZIP METAIRIE LA 70002

TITLE T ☐ Delete
NAME HARDEY, MATTHEW W
STREET ADDRESS 3850 N. CAUSEWAY BLVD., SUITE 1770
CITY-ST-ZIP METAIRIE LA 70002

TITLE S ☐ Delete
NAME KEATING, EDAH
STREET ADDRESS 3850 N. CAUSEWAY BLVD., SUITE 1770
CITY-ST-ZIP METAIRIE LA 70002

TITLE CB ☐ Delete
NAME COLE, JAMES D
STREET ADDRESS 3850 N. CAUSEWAY BLVD., SUITE 1770
CITY-ST-ZIP METAIRIE LA 70002

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

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

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

500003111725--7
-01/26/00--01105--001
****200.00 ****150.00

Handwritten signature/initials

1/10/2000 (504) 838-8222