

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P940000862/6**

1. Entity Name

S&S Quality Home Construction I

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90012 020 ***150.00

C0074481

DO NOT WRITE IN THIS SPACE

| | | | |
|---|--|---|---|
| Principal Place of Business 4912 PICTURE AVE HOLIDAY FL. 34690 | | Mailing Address 4912 PICTURE AVE HOLIDAY FL. 34690 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 4. FEI Number 59-3280318 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent STAVROS SAVOPOULOS 4912 PICTURE AVE HOLIDAY FL. 34690 | | 7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____ | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so: <input type="checkbox"/> <small>(See criteria on back)</small> | | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State | |
| | | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete DP STAVROS SAVOPOULOS 4912 PICTURE AVE HOLIDAY FL. 34690 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE: President Stavros Savopoulos | | Date 7-22-01 Daytime Phone # 727-365-1642 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | |

CR2E034 (11/00)

Attachment
DOC# P94000086216
To CO# 74481

July 6, 2001

Division of Corporations.

This letter is in reference to
the filing fee for 2001, SFS
Quality Home Construction Inc.
Document # P94000086216.

I believe to the best of my
knowledge that I did mail out
the fee of \$150.00 for 2001. ~~the~~

I received 7-3-01 a new packet
for September to fill out. I called
on 7-6-01 to check if they received
May of 2001 and they have not.

So here is a check enclosed of \$150.00
for ~~the~~ May of 2001. I'm still
checking my records to see what
I did wrong. Please excuse my mix
up. Thank you Stavros Savopoulos President
SFS Quality Home Const my # 74481

Attachment
Doc# P94000086216
C0074481



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 12, 2001

S & S QUALITY HOME CONSTRUCTION, INC.
4912 PICTURE AVE
HOLIDAY, FL 34690 US

SUBJECT: S & S QUALITY HOME CONSTRUCTION, INC.
Ref. Number: P94000086216

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Due to the volume of mail received in this office **both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.**

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Tyrone Scott
Document Specialist

Letter Number: 201A00041242