

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90064 045 ***158.75

DOCUMENT # P95000032921

1. Entity Name

POMPAÑO LOCK & DOOR, INC.

Principal Place of Business

**1294 N FEDERAL HWY
 POMPAÑO BEACH FL 33062
 US**

Mailing Address

**1294 N FEDERAL HWY
 POMPAÑO BEACH FL 33062
 US**

2. Principal Place of Business

1310 N Federal Hwy
 Suite, Apt. #, etc.

3. Mailing Address

1310 N. Federal Hwy
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

POMPAÑO Beach FL

City & State

POMPAÑO Beach FL

4. FEI Number

65-0681324

Applied For

Not Applicable

Zip

33062

Country

BROWARD

Zip

33062

Country

BROWARD

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

6. Name and Address of Current Registered Agent

**MITCHELL, IRENE C
 1294 N FEDERAL HWY
 POMPAÑO BEACH FL 33062**

7. Name and Address of New Registered Agent

Name **MITCHELL, IRENE C**

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

1310 N. Federal Hwy

City **POMPAÑO BEACH FL**

Zip Code **33062**

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) ☒

**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. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
 NAME **MITCHELL, IRENE C**
 STREET ADDRESS **1294 N FEDERAL HWY**
 CITY-ST-ZIP **POMPAÑO BEACH FL 33062**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **MITCHELL, IRENE C**
 STREET ADDRESS **1310 N. FEDERAL HWY**
 CITY-ST-ZIP **POMPAÑO BEACH FL 33062**

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

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 NAME
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 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: **Irene C Mitchell**
 IRENE C MITCHELL

3-12-2001

Date

**954-943
 1255**

Daytime Phone #

CR2E034 (10/00)

0125155