

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

FILED
Jun 03, 2002 8:00 am
Secretary of State

06-03-2002 91200 028 ***150.00

DOCUMENT # 95000045538

1. Entity Name

CHRISTOPHER MARK BUILDING & RENOVATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2407 BREAKWATER CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

2407 BREAKWATER CIRCLE

Suite, Apt. #, etc.

City & State

SARASOTA, FLORIDA

City & State

SARASOTA FLORIDA

Zip

Country

34231 USA

Zip

Country

34231 USA

4. FEI Number

65-0596824

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

CHRISTOPHER MARK ELLIOTT

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

2407 BREAKWATER CIRCLE

City

SARASOTA

FL

Zip Code

34231

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

Christopher Mark Elliott (CHRISTOPHER MARK ELLIOTT), PRESIDENT

5-31-02

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
CHRISTOPHER MARK ELLIOTT
2407 BREAKWATER CIRCLE
SARASOTA, FLORIDA 34231

TITLE
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CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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:

Christopher Mark Elliott (CHRISTOPHER MARK ELLIOTT)

Date

Daytime Phone #

5-31-02 941-926-2429

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR