

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90052 031 ***150.00

MA1007 AV

DOCUMENT # P95000053984

1. Entity Name

S.O.S. DRIVERS, INC.

448920



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**1035 HIGHLAND AVE. N. E.
 UPSTAIRS #1
 LARGO FL 33770
 US**

Mailing Address

**1035 HIGHLAND AVE. N. E.
 UPSTAIRS #1
 LARGO FL 33770
 US**

2. Principal Place of Business

**3298-21st AVE S.W.
 Suite, Apt. #, etc.**

3. Mailing Address

**3298-21st AVE S.W.
 Suite, Apt. #, etc.**

City & State

Largo FL

City & State

Largo, FL

4. FEI Number

59-3324465

Applied For

Not Applicable

Zip

33774

Country

U.S.A.

Zip

33774

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**COOK, HOWARD
 1035 HIGHLAND AVE. N. E.
 UPSTAIRS #1
 LARGO FL 33770**

7. Name and Address of New Registered Agent

**Name: Dawn Grooms, President
 Street Address (P.O. Box Number is Not Acceptable):
 3298-21st AVE S.W.
 Largo FL
 City: FL Zip Code: 33774**

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

Dawn Grooms Dawn Grooms President

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, 2002 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	PDT	<input type="checkbox"/> Delete
NAME	GROOMS, DAWN T	
STREET ADDRESS	3298 -21ST AVE S.W.	
CITY-ST-ZIP	LARGO FL 33774	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	FRANCEK, TIMOTHY A	
STREET ADDRESS	3298 - 21ST AVE. S.W.	
CITY-ST-ZIP	LARGO FL 33774	
TITLE	D	<input type="checkbox"/> Delete
NAME	FRANCEK, ROBERTA M	
STREET ADDRESS	7501 - 142ND AVE. N. #553	
CITY-ST-ZIP	LARGO FL 33771	
TITLE	D	<input type="checkbox"/> Delete
NAME	COOK, MAXINE A.	
STREET ADDRESS	1035 HIGHLAND AVE. N.E.	
CITY-ST-ZIP	LARGO FL 33771	
TITLE	D	<input type="checkbox"/> Delete
NAME	COOK, HOWARD E	
STREET ADDRESS	1035 HIGHLAND AVE N.E.	
CITY-ST-ZIP	LARGO FL 33770	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Dawn Grooms

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-02

Date

727-585-7441

Daytime Phone #

CR2E034 (9/01)