

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91592 009 ***150.00

DOCUMENT # P95000057301

1. Entity Name
A & D CONCRETE SAWING & DRILLING, INC.

Principal Place of Business
3101 OLEANDER AVENUE BAY 8
FORT PIERCE FL 34982

Mailing Address
3101 OLEANDER AVENUE BAY 8
FORT PIERCE FL 34982



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
524 S. Market Ave.
 Suite, Apt. #, etc.

3. Mailing Address
524 S. Market Ave.
 Suite, Apt. #, etc.

City & State
Ft. Pierce, FL
Zip **34982** **Country** **USA**

City & State
Ft. Pierce, FL
Zip **34982** **Country** **USA**

4. FEI Number **65-0599030** **Applied For**
 Not Applicable

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

6. Name and Address of Current Registered Agent

AVERY, CHARLES
8000 SEAGRAPE DRIVE
FORT PIERCE FL 34982

7. Name and Address of New Registered Agent

Name **Avery, Charles**
Street Address (P.O. Box Number is Not Acceptable) **524 S. Market Ave.**
City **Ft. Pierce** **FL** **Zip Code** **34982**

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 *Charles Avery* **Charles Avery, Pd** **4/9/02**
 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)

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 **PD** ☐ Delete
NAME **DUNAJEWSKI, JULIUS**
STREET ADDRESS **248 MARINA DR**
CITY-ST-ZIP **HUTCHINSON ISLAND FL 34949**

TITLE **STD** ☐ Delete
NAME **AVERY, CHARLES**
STREET ADDRESS **5611 SMITH LANE**
CITY-ST-ZIP **FORT PIERCE FL 34982**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **STD** ☒ Change ☐ Addition
NAME **Dunajewski, Julius**
STREET ADDRESS **248 Marina Drive**
CITY-ST-ZIP **Hutchinson Island, FL 34949**

TITLE **PD** ☒ Change ☐ Addition
NAME **Avery, Charles**
STREET ADDRESS **3365 Matthews Rd.**
CITY-ST-ZIP **Ft. Pierce, FL 34945**

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: *Charles Avery* **Charles Avery** **4/9/02** **772-467-1155**
 Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CP2E034 (9/01)