FILED
Aug 24, 2001 8:00 am
Secretary of State
08-24-2001 90006 019 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000069244

1. Entity Name
STAN'S CONSULTING SERVICES, INC.

C0075683

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business
10098 Spyglassway
Boca Raton, FL 33498

Mailing Address

2. Principal Place of Business	3. Mailing Address
10098 Spyglassway	10098 Spyglassway
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FLORIDA	City & State: FLORIDA
Zip: 33498 Country: US	Zip: 33498 Country: US

4. FEI Number 65-0607678 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
Schneider, Stanley A.
10098 Spyglassway
Boca Raton, FL 33498

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 ____________________ Date
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ $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	P STANLEY A. SCHNEIDER 10098 SPYGLASS WAY BOCA RATON, FL 33498 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

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: Stanley A Schneider 8/2/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date