

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90086 001 ***150.00

DOCUMENT # P95000070370

1. Entity Name

PROFAST SYSTEMS, INC.

Principal Place of Business

2011 NW 33RD STREET
POMPANO BEACH FL 33064
US

Mailing Address

2011 NW 33RD STREET
POMPANO BEACH FL 33064
US

2. Principal Place of Business

2100 N. POWERLINE RD

3. Mailing Address

PO BOX 2183

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

POMPANO BEACH, FL

City & State

POMPANO, FL

Zip

33064

Country

USA

Zip

33061-2183

Country

USA

4. FEI Number

65-0615396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEVANEY, SCOTT
4020 NE 23RD TERR
LIGHTHOUSE POINT FL 33064

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME JEVANEY, SCOTT C
STREET ADDRESS 2010 NW 33RD CT
CITY-ST-ZIP POMPANO BEACH FL ☐ Delete

TITLE D
NAME JEVANEY, SCOTT C
STREET ADDRESS 2010 NW 33RD CT
CITY-ST-ZIP POMPANO BEACH FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE PRES JEVANEY, SCOTT C
NAME JEVANEY, SCOTT C
STREET ADDRESS 2700 N. POWERLINE RD.
CITY-ST-ZIP POMPANO BEACH, FL 33064 ☐ Change ☐ Addition

TITLE D DIRECTOR
NAME JEVANEY, SCOTT C
STREET ADDRESS 2700 N. POWERLINE RD.
CITY-ST-ZIP POMPANO BEACH, FL 33064 ☐ Change ☐ Addition

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

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

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

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

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 of 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/30/01 9549681434

CR2E034 (10/00)