

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000090284

1. Entity Name

COMBINED CONTRACTORS, INC.

Principal Place of Business

1630 NE 62 ST
FT. LAUDERDALE FL 33334

Mailing Address

1630 NE 62 ST
FT. LAUDERDALE FL 33334-5140

2. Principal Place of Business

230 S. Cypress Road

3. Mailing Address

Suite, Apt. #, etc.
Suite I

Suite, Apt. #, etc.

City & State
Pompano Beach, FL 33060

City & State

Zip
33060

Country
Broward

Zip
Country

4. FEI Number 65-0677946

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

PIERCE, CLYNTON J
1630 N.E. 62ND STREET
UNIT A
FT. LAUDERDALE FL 33334

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, 2000 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
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PIERCE, CLYNTON J
1630 N.E. 62ND ST. UNIT A
FT. LAUDERDALE FL 33334 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.S.T.
PIERCE, CLYNTON J.
1630 N.E. 62 ST. Unit A
Ft. Lauderdale, FL 33334 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
PIERCE, JOHN
1630 N.E. 62ND ST. UNIT B
FT. LAUDERDALE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WHIPPLE, BRENDA S
1630 N.E. 62ND ST. UNIT A
FT. LAUDERDALE FL 33334 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ Delete

TITLE
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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 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:

Clynton J. Pierce 3/14/2000 954-782-9051

Date

Daytime Phone #