

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P 95000095672**

1. Entity Name
Chris Kefalas Trucking Company, Inc.

APPROVED
AND
FILED
Tg/472

00 SEP 14 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**3218 McKinley Street
Hollywood FL 33021**

Mailing Address
**3218 McKinley Street
Hollywood, FL 33021**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip
Country

4. FEI Number
65-0664004

Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**Kefalas, Chris
3218 McKinley St.
Hollywood, FL 33021**

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 _____ (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. ☐ **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 President Kefalas, Chris 3218 McKinley St Hollywood, FL 33021	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 200003398122--4 -09/19/00--01049--022 ***150.00 ***150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 **Chris Kefalas** **Chris Kefalas** **9/5/00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

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Astute Tax and Accounting, Inc.

**5450 Northwest 33rd Avenue
Suite 111
Fort Lauderdale, Florida 33309**

**(954) 484-1950
Fax (954) 484-1199**

September 8, 2000

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn.: Michelle

Re: CHRIS KEFALIS TRUCKING COMPANY, INC..
Document # P95000095672

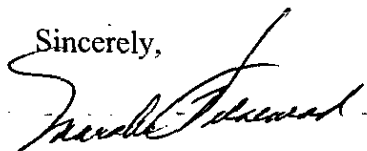
Dear Michelle,

We are the accountants for the above mentioned company. For some unknown reason, they never received their first notice for filing of the 2000 Uniform Business Report.

Enclosed is their check for \$150,00. Would you be kind enough to wave the late charges on his account. We would be very great full for anything you can do for us.

We as their accountants will make sure this does not happen again. Thank you again for your kind consideration.

Sincerely,



Marsha Hilsenrad
Office Manager
Astute Tax & Accounting, Inc.