

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 22, 2001 08:00 AM**
Secretary of State**DOCUMENT # P95000096050**1. Entity Name
FOSTER-WEBB ENTERPRISES, INC.

Principal Place of Business

70 AVENUE E, NORTH

ABURNDALE
33823

FL

Mailing Address

70 AVENUE E, NORTH

ABURNDALE
33823

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3356031

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

7. Name and Address of New Registered Agent

WEBB TERRELL O
70 AVE E NAUBURNDALE FL
33823 US

Name

WEBB,SR. TERRELL O

Street Address (P.O. Box Number is Not Acceptable)

70 AVE E N

City

AUBURNDALE

FL

Zip Code
33823

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 **TERRELL O. WEBB SR.****02/22/2001**

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 ST ☐ Delete
NAME WEBB TERRELL O
STREET ADDRESS 160 AVENUE F, SOUTH
CITY-ST-ZIP AUBURNDALE FL 33823TITLE ST ☒ Change ☐ Addition
NAME WEBB,SR. TERRELL O
STREET ADDRESS 160 AVENUE F, SOUTH
CITY-ST-ZIP AUBURNDALE FL 33823TITLE P ☐ Delete
NAME FOSTER HARRY MIH
STREET ADDRESS 3201 HURST ROAD
CITY-ST-ZIP AUBURNDALE FL 33823TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ 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: Terrell O. Webb, Sr.

S/T

02/22/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)