## 2002 UNIFORM BUSIN'SS REPORT (UBR)

## May 06, 2002 8:00 am Secretary of State DOCUMENT # P96000004043 1. Entity Name 05-06-2002 90175 029 \*\*\*150.00 **GULF COAST BOX & TAPE INC.** Principal Place of Business Mailing Address 3828 NAVY BLVD. 127 E. ZARGOZA ST PENSACOLA FL 32507 STE 206 PENSACOLA FL 32501 2. Principal Place of Business Mailing Address TH AVE .O Suite, Apt. II, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3353490 ENSACOL Not Applicable Zip Country \$8:75-Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BASS & SANDFORT ACCTS INC. Bass and Sandfort Accountants INC Street 127 E. ZARGOZA ST 2620 N 12th Ave STE. 206 Pensacola FL PENSACOLA BEACH FL 32561 City 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Defete ☐ Change Addition NAME FRITZ, PAUL NAME STREET ADDRESS 100 FT. PICKENS RD., APT. #105 STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32561 CITY-ST-ZIP TITE F ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-789 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE ' Delete WILE. Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

Thereby certify that the information supplied with this filing does not our the corresponding to the corresponding to the corporation 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 hat my signature shall have the same legal effect as it 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.

**FILED**