

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91338 008 ***150.00

DOCUMENT # P96000015586

1. Entity Name

A+ KITCHENS & CLOSETS, INC.

Principal Place of Business

**921D 26TH AVENUE EAST
 BRADENTON FL 34208
 US**

Mailing Address

**921D 26TH AVENUE EAST
 BRADENTON FL 34208
 US**

2. Principal Place of Business

1808 CORTEZ RD. W.

Suite, Apt. #, etc.

SUITE 107

City & State

BRADENTON, FL

Zip

34207

Country

FLORIDA

3. Mailing Address

1808 CORTEZ RD. W.

Suite, Apt. #, etc.

SUITE 107

City & State

BRADENTON, FL

Zip

34207

Country

FLORIDA

4. FEI Number

65-0668076

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

WADE, BRIAN P

**4706B 30TH STREET WEST
 BRADENTON FL 34207**

7. Name and Address of New Registered Agent

Wade, Brian P.

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

619 Magellan Drive

Sarasota, FL 34243

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, 2002 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

TITLE **P** ☐ Delete
 NAME **WADE, BRIAN**
 STREET ADDRESS **4760B 30TH STREET WEST**
 CITY-ST-ZIP **BRADENTON FL 34207**

TITLE **VP** ☐ Delete
 NAME **DELGADO, ISRAEL**
 STREET ADDRESS **3405 5TH AVENUE WEST**
 CITY-ST-ZIP **PALMETTO FL 34221**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **Wade, Brian**
 STREET ADDRESS **619 Magellan Drive**
 CITY-ST-ZIP **Sarasota, FL 34243**

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

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

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

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

TITLE ☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/20/02 752-3880

CR2E034 (9/01)