

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000042632

1. Entity Name

MJ CHERMAK CONSTRUCTION COMPANY

FILED

Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90292 035 ***150.00

Principal Place of Business

1256 LAQUINTA DR
SUITE B
ORLANDO FL 32809
US

Mailing Address

1256 LAQUINTA DR
SUITE B
ORLANDO FL 32809
US

2. Principal Place of Business

#105 Calle Doncella

3. Mailing Address

5417 BROOKLINE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Santurce PR

City & State

ORLANDO FL

Zip

00913

Country

US

Zip

32819

Country

US

4. FEI Number

59-3881136

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

CHERMAK, MARK
1256 LAQUINTA DR
ORLANDO FL 32809

Name

Mark Chermak

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

5417 BROOKLINE DR

City

ORLANDO

FL

Zip Code

(32819)

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

Mark J. Chermak

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 PD
NAME CHERMAK, MARK J
STREET ADDRESS 7716 CHAPEL HILL DRIVE
CITY-ST-ZIP ORLANDO FL 32819 ☐ Delete

TITLE P.D.
NAME Mark J Chermak
STREET ADDRESS 5417 BROOKLINE DR
CITY-ST-ZIP ORLANDO, FL 32819 ☒ Change ☐ Addition

TITLE VSD
NAME CHERMAK, DIANE
STREET ADDRESS 7716 CHAPEL HILL DRIVE
CITY-ST-ZIP ORLANDO FL 32819 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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:

Mark J. Chermak

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark J. Chermak

407 909 9661

3-27-01

Daytime Phone #

CR2E034 (10/00)