

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2002 8:00 am
Secretary of State

0547808 AV

DOCUMENT # P96000042649

1. Entity Name
GENESIS INDUSTRIAL, INC.

02-28-2002 90029 014 ***150.00

Principal Place of Business
1411 GARDEN AVE
TARPON SPRINGS FL 34689

Mailing Address
1411 GARDEN AVE
TARPON SPRINGS FL 34689



2. Principal Place of Business
1831 OAKmont Ave
 Suite, Apt. #, etc.

3. Mailing Address
931 Bayshore Dr.
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Tarpon Springs
 Zip
34689
 Country
U.S.A.

City & State
Tarpon Springs
 Zip
34689
 Country
U.S.A.

4. FEI Number
59-3386623

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

CHRYSAKIS, CHRIS
931 BAYSHORE DRIVE
TARPON SPRINGS FL 34689

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 Emmanuel Chryakis Pres
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

2-18-02
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **P**
CHRYSAKIS, EMMANUEL
 STREET ADDRESS **1411 GARDEN AVE**
 CITY-ST-ZIP **TARPON SPRINGS FL 34689**

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

TITLE ☐ Delete
 NAME **S**
CHRYSAKIS, CHRIS
 STREET ADDRESS **1411 GARDEN AVE**
 CITY-ST-ZIP **TARPON SPRINGS FL 34689**

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

TITLE ☐ Delete
 NAME **T**
CHRYSAKIS, PHIL
 STREET ADDRESS **1411 GARDEN AVE**
 CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Delete
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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: Emmanuel Chryakis 2-18-02 727-938-5388
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)