

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000056950

1. Entity Name

CONSUMER GROUP SERVICES OF TAMPA, INC.



FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90149 019 ***150.00

Principal Place of Business

29399 US 19 N
 280
 CLEARWATER FL 33761
 US

Mailing Address

29399 US 19 N
 280
 CLEARWATER FL 33761
 US

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

59-3389837

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

NICHOLAS, DIANA
 29399 US 19 N STE 290
 CLEARWATER FL 33761

Name

Nicholas Diana

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

29399 US 19 N., Ste 280

City

Clearwater

FL

Zip Code

33761

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D
 STREET ADDRESS DIANA, NICHOLAS
 CITY-ST-ZIP 168 RUE DES CHATEAUX
 TARPON SPRINGS FL 34689

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS SCHULER, JAMES F
 CITY-ST-ZIP 2800 N.W. 121 AVENUE
 PLANTATION FL 33323

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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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:

(Signature of Nicholas Diana)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/00

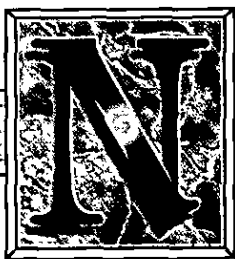
Date

727-785-2211

Daytime Phone #

CR2E034 (5/00)

Attachment
P96000056950
00085432



THE NICHOLAS INSURANCE GROUP, INC.

Sept. 7, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: FEI# 59-3389837 (Consumer Group Services of Tampa, Inc.)

To whom it may concern,

Per my telephone conversation with Shawn Green at the Department of State today I have enclosed a check in the amount of \$150.00 for the 2000 Uniform Business Report filing. Unfortunately, we never received the first notice that this fee was due. As a result, we are being charged a late filing fee. However, Mr. Green advised us to pay only \$150.00 and enclose this letter along with the report to the Department of State.

If you have any questions please call my office at the telephone number listed at the bottom of this letter.

Thank you,

Nicholas Diana
President