

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 10, 2001 8:00 am  
Secretary of State

04-10-2001 90035 029 \*\*\*150.00

DOCUMENT # P96000057845

1. Entity Name

MARK MILLS CUSTOM PAINTING, INC.

Principal Place of Business

21 MEADOW DRIVE  
BOYNTON BEACH FL 33462

Mailing Address

21 MEADOW DRIVE  
BOYNTON BEACH FL 33462

00033372

2. Principal Place of Business

1241 GONDOLA LANE  
Suite, Apt. #, etc. —

3. Mailing Address

1241 GONDOLA LANE  
Suite, Apt. #, etc. —



DO NOT WRITE IN THIS SPACE

City & State

Boynton Beach, FL

City & State

Boynton Beach, Florida

4. FEI Number

65-0683041

Applied For

Not Applicable

Zip

Country

33426

PAIM Beach

Zip

Country

33426

PAIM Beach

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

JAKABCIN, KATHRYN M  
1325 S CONGRESS AVE STE 104  
BOYNTON BEACH FL 33426

7. Name and Address of New Registered Agent

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

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

TITLE PD  
NAME MILLS, MARK  
STREET ADDRESS 21 MEADOW DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33462 ☐ Delete

TITLE SD  
NAME MILLS, KATHRYN  
STREET ADDRESS 21 MEADOW DRIVE  
CITY-ST-ZIP BOYNTON BEACH FL 33462 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME MARK MILLS  
STREET ADDRESS 1241 GONDOLA LANE  
CITY-ST-ZIP BOYNTON BEACH, FL. 33426

TITLE SD ☒ Change ☐ Addition  
NAME Kathryn Mills  
STREET ADDRESS 1241 GONDOLA LANE  
CITY-ST-ZIP BOYNTON BEACH, FL. 33426

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: Mark Mills Mark Mills  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01  
Date

561.364.1657  
Daytime Phone #

CR2E034 (10/00)