

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000059057

1. Entity Name

PLUMBRXPRESS, INC.

FILED
Sep 07, 2000 8:00 am
Secretary of State

09-07-2000 90002 033 ***150.00

Principal Place of Business

458 SE GALLEON LANE
 PORT ST. LUCIE FL 34983

Mailing Address

P.O. BOX 1891
 STUART FL 34995
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

452 SE Galleon Lane

Suite, Apt. #, etc.

P.O. Box 1891

City & State

Port St. Lucie, FL

City & State

Stuart, FL

Zip

34983

Country

USA

Zip

34995

Country

USA

4. FEI Number

65-0689249

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

NADEAU, PHILIP J
 458 SE GALLEON LANE
 PORT ST. LUCIE FL 34983

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

Philip J. Nadeau

8-29-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

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

TITLE D ☐ Delete
 NAME NADEAU, PHILIP J
 STREET ADDRESS 458 SE GALLEON LANE
 CITY-ST-ZIP PORT ST. LUCIE FL 34983

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME Nadeau, Philip J
 STREET ADDRESS 452 SE Galleon Lane
 CITY-ST-ZIP Port St. Lucie, FL 34983

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

TITLE ☐ Change ☐ Addition
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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:

Philip J. Nadeau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-29-00

Date

561-340-7499

Daytime Phone #

CR2E034 15/00

August 29, 2000
attachment doc #000837
P9600059057

To whom it may concern;

Dear Sirs,

Please find enclosed my payment for \$150.00. I did not receive the first notice which was apparently mailed sometime in Jan. of 2000. I do not understand why I never received it since it was sent to the corporate P.O. box located inside the Stuart, FL Post office and this has been a safe place to receive mail.

Please accept the enclosed check for \$150.00 as payment in full for the 2000 Uniform Business Report. I thank you for your consideration in this matter.

Respectfully,

Philip J. Nadeau
President / Secretary

Plumb Rx Press, Inc.

PLUMB RX PRESS, INC.
P. O. Box 1891
Stuart, FL 34995