

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000062768

1. Entity Name  
HERCULES CERAMIC, INC.



Principal Place of Business

9126 DEBBIE LANE  
HUDSON FL 34669

Mailing Address

9126 DEBBIE LANE  
HUDSON FL 34669

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PSETAS, GEORGE C  
6710 EMBASSY BLVD. STE 105  
PORT RICHEY FL 34668

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 \$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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVST  
HAIMALAS, ANDREAS G  
9126 DEBBIE LANE  
HUDSON FL 34669 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-29-00  
Date

727-869-2272  
Daytime Phone #

**FILED**  
**Sep 05, 2000 8:00 am**  
**Secretary of State**

09-05-2000 90024 002 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3424189

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

CR2E034 (5/00)

Attachment Doc# P96000062768  
D0083299

Hercules Ceramic, Inc.  
9126 Debbie Lane  
Hudson, Fl. 34669

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

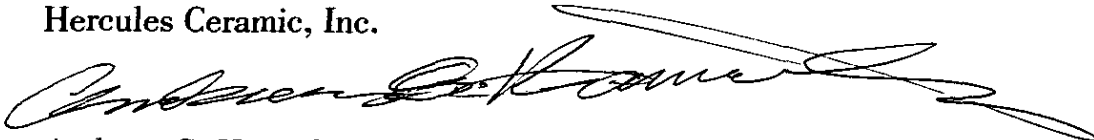
Katherine Harris  
Secretary of State

Dear Miss Harris,

We are remitting the sum of \$150.00 for our corporation fees for the year 2000. This is the first notice we have received. We called your office and spoke with Robert on 7-5-00 at 12:35 pm. Robert advised us to mail \$150.00 before 9-13-00 deadline, along with this letter stating that we had not received the first notice.

Thank you for your assistance.

Hercules Ceramic, Inc.



Andreas G. Haimalas  
(President)