

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000075921**

1. Entity Name

UNIVERSAL SEALS, INC.**FILED**
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90116 001 ***150.00

Principal Place of Business

10455 S. SUNCOAST BLVD
LOT 56
HOMOSASSA FL 34446

Mailing Address

10455 S. SUNCOAST BLVD
LOT 56
HOMOSASSA FL 34446-5039

2. Principal Place of Business

7046 W.LINCOLNSHIRE DR.

Suite, Apt. #, etc.

3. Mailing Address

7046 W.LINCOLNSHIRE DRIVE

Suite, Apt. #, etc.

City & State

HOMOSASSA, FLORIDA

City & State

HOMOSASSA, FL 34446

4. FEI Number

59-3411987

Applied For

Not Applicable

Zip

34446

Country

USA

Zip

34446

Country

USA

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

6. Name and Address of Current Registered Agent

SPANOLIS, JAMES J ESQ.
36358 U.S. HIGHWAY 19 NORTH
PALM HARBOR FL 34684

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	WHITNEY, SHIRLEY	26 HARBOR LAKE CIRCLE	SAFETY HARBOR FL 34695	<input type="checkbox"/>
VP	WHITNEY, JOHN F.	26 HARBOR LAKE CIRCLE	SAFETY HARBOR FL 34695	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PD	WHITNEY, SHIRLEY	7046 W.LINCOLNSHIRE DRIVE	HOMOSASSA, FL 34446	<input checked="" type="checkbox"/>
VP/D	WHITNEY, JOHN F.	7046 W.LINCOLNSHIRE DRIVE	HOMOSASSA, FL 34446	<input checked="" type="checkbox"/>
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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: *Shirley A. Whitney - P/D*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/7/00 (352) 382-0701