

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

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1. Entity Name

ORLANDO PLASTICS & MANUFACTURING, INC.

✓ SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2 S. Orange Avenue

3. Mailing Address

2 S. Orange Avenue

Suite, Apt. #, etc.

5th Floor

5th Floor

DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

Orlando, FL 32801

4. FEI Number

59-3401307

Applied For:

Not Applicable

Zip

32801

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Craig S. Pearlman

Street Address (Do Not Include P.O. Box)
2 S. Orange Avenue, 5th Floor

City Orlando

FL

Zip Code 32801

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
President/Secretary/Treasurer
David Minkow
917 Versailles Circle
Maitland, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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-05/08/02--01043--009
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/02 (407) 399-3047

CR2E034B (12/01)

KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES, P.A.

ATTORNEYS AND COUNSELORS AT LAW

WILLIAM J. DENIUS
THOMAS H. JUSTICE III ¹
FRANK H. KILLGORE, JR.
BRENDA J. NEWMAN

2 SOUTH ORANGE AVENUE, 5th FLOOR
ORLANDO, FLORIDA 32801

MARK L. ORNSTEIN ³
CRAIG S. PEARLMAN ²
T. GREY SQUIRES ³
MARTIN F. STAMP ⁴

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³ CERTIFIED CIRCUIT COURT MEDIATOR
⁴ ALSO MEMBER OF NEW YORK & TEXAS BAR

¹ ALSO MEMBER OF VIRGINIA BAR
² ALSO MEMBER OF DC & WEST VIRGINIA BAR

Sender's email address:
cpearlman@kpsos.com

April 24, 2002

Secretary of State
Division of Corporations
Tallahassee, FL

RE: Orlando Plastics & Manufacturing, Inc.

Dear Sir/Madam:

I enclose herewith the Uniform Business Report for Orlando Plastics & Manufacturing, Inc. along with our check in the amount of \$150.00 to cover the cost of filing.

Very truly yours,

KILLGORE, PEARLMAN, STAMP,
ORNSTEIN & SQUIRES

Craig S. Pearlman
Craig S. Pearlman

CSP:se

Enclosures