

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000084680

1. Entity Name

INTEGRATED PEST MANAGEMENT, INC.

(R)

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90019 008 ***150.00

Principal Place of Business

6575 SE FLORAL TER.
HOBE SOUND FL 33455

Mailing Address

PO BOX 2263
HOBE SOUND FL 33475
US

2. Principal Place of Business

581 SE SOUTHWOOD TR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

STUART, FL.

City & State

4. FEI Number

65-0708081

Applied For

Not Applicable

Zip

33497

Country

U.S.

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIGNATO, LANCE
6575 SE FLORAL TERR
HOBE SOUND FL 33455

7. Name and Address of New Registered Agent

Name

LANCE PIGNATO

Street Address (P.O. Box Number is Not Acceptable)

581 SE SOUTHWOOD TR.

City

STUART

FL

Zip Code

32997

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

TITLE ☐ Delete
NAME D
STREET ADDRESS PIGNATO, LANCE A
CITY-ST-ZIP 6575 SE FLORAL TER.
HOBE SOUND FL 33455

TITLE ☐ Delete
NAME D
STREET ADDRESS PIGNATO, MICHELLE Z
CITY-ST-ZIP 6575 SE FLORAL TER.
HOBE SOUND FL 33455

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
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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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/7/00
Date

561-719-9436
Daytime Phone #

CR2E034 (5/00)

Attachment UDC#:
p96000084686
A0072751
081500

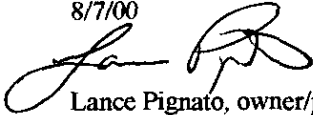
INTEGRATED PEST MANAGEMENT INC.

P. O. Box 2263
Hobe Sound, Florida 33475
(561)286-7660 FAX (561)286-7660

To: The Department of State
From: Integrated Pest Management, Inc.

I have just recently received a 2nd notice UBR for 2000. The shocker is that I never received the 1st notice or I would have sent it out immediately. I am very disciplined when it comes to renewing licenses, paying taxes, filing reports, etc. . I promise you I never received the original UBR. Please forgive me! I apologize for the inconvenience. I am a honest business man and I am not lying or trying to be deceitful. Please call me if you have any questions pertaining to this situation.

8/7/00



Lance Pignato, owner/president

Mobile 561-719-9436
Home 561-219-8251
Office 561-286-7660