

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000002033

1. Entity Name

WIDMER'S CUSTOM DESIGN, INC.

FILED

Feb 19, 2000 8:00 am
Secretary of State

02-19-2000 90011 050 ***150.00

Principal Place of Business

Mailing Address

8917 MAISLIN DRIVE
TAMPA FL 33610

8917 MAISLIN DRIVE
TAMPA FL 33637-6730

2. Principal Place of Business

3. Mailing Address

8931 MAISLIN DR

8931 MAISLIN DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-3427903

Applied For

Not Applicable

Zip

33637

Country

Zip

33637

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WIDMER, RICHARD J

8931-8917 MAISLIN DRIVE
TAMPA FL 33610

Name

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

8931 MAISLIN DRIVE

City

TAMPA

FL

Zip Code

33637

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 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	PD	<input type="checkbox"/> Delete
NAME	WIDMER, RICHARD J	
STREET ADDRESS	4104 OHIO AVENUE	
CITY-ST-ZIP	TAMPA FL 33616	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	WIDMER, RICHARD J	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8931 MAISLIN DR	
STREET ADDRESS	TPA, FL 33637	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

R. J. Widmer, JR.
PRES.
R. J. WIDMER JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-26-00 (813) 984-0032