

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000028945

1. Entity Name

FIX THIS & FIX THAT, INC.

f

FILED

Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90155 029 ***150.00

Principal Place of Business

1341 BRADFORD RD
FORT MYERS FL 33901
US

Mailing Address

1341 BRADFORD RD
FORT MYERS FL 33902
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0753447

Applied For

Not Applicable

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

GRIFFITH, ALLAN T
2100 MCGREGOR BLVD
FT MYERS FL 33901

Name

Ralph V Cimato

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

1341 Bradford Rd

City

FT MYERS

FL

Zip Code

33901

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]

Signature, typed or printed name of registered agent and title if applicable.

Ralph V Cimato

(NOTE: Registered Agent signature required when reinstating)

7/28/00

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
PST
CIMATO, RALPH
1341 BRADFORD RD
FORT MYERS FL 33901 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ Delete

TITLE
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

7/28/00

Date

941-939-1294

Daytime Phone #

Attachment
#p9700028915

7/28/00
D0075951

Received first notice on 7/27/00
of Filing Fee. Spoke to agent at
488-9000# and explained that I
did not receive first notice.
agent informed me to send check for \$1500.00
and letter.

I changed the ^{res.} agent also to myself
to make sure there wasn't a mix up of
address. I do not use the attorney
any more.

Thank you

RVC

