

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2003 8:00 am
Secretary of State

07-31-2003 90073 002 ***150.00

009067 AV

DOCUMENT # P97000029470

1. Entity Name
PLUS BENEFITS UNLIMITED, INC.



Principal Place of Business
1876 COFFEE POT BLVD NE
SAINT PETERSBURG FL 33704
US

Mailing Address
1876 COFFEE POT BLVD NE
SAINT PETERSBURG FL 33704
US



2. Principal Place of Business
204 37 ave N
Suite, Apt. #, etc.
363

3. Mailing Address
204 37 ave N
Suite, Apt. #, etc.
363

☐ CHECK HERE IF MAKING CHANGES

City & State
St Pete, FL

City & State
St Pete, FL

Zip
33704

Country
Pinellas

Zip
33704

Country
USA

4. FEI Number **59-3436807**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BUSSEY, HUBERT
1876 COFFEE POT BLVD NE
SAINT PETERSBURG FL 33704

7. Name and Address of New Registered Agent
Name
Bussey, Hubert R
Street Address (P.O. Box Number is Not Acceptable)
204 37 ave N #363
City
St. Pete FL Zip Code
33704

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE **7-28-03**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSSEY, HUBERT 1876 COFFEE POT BLVD NE SAINT PETERSBURG FL 33704 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	204 37 Ave N #363 St. Pete, FL 33704 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSSEY, GLORIA 1876 COFFEE POT BLVD NE SAINT PETERSBURG FL 33704 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	204 37 Ave. N #363 St. Pete, FL 33704 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 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
Date **7/21/03** Daytime Phone # _____

CR2ED34 (4/03)

7-28-03

Attachment #

80135097

Dear Florida Dept of State: PG7000029470
my wife & myself never the unformed
business report for 2003.

We have been much time in Texas
due to family sickness and have
just received your letter of tardiness

We have always been prompt and
respectfully request abatement of
your interest & penalty. Please
reinstate our company & use
the following address for future
correspondence.

204 37th Ave N.
St. Petersburg, FL 33704

Sincerely
ARR Bussey