

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90033 015 ***150.00

00081436

DO NOT WRITE IN THIS SPACE

DOCUMENT # **097006030660**

1. Entity Name

Nelson's Enterprises of Tampa, Inc

Principal Place of Business

**109 Central Dr
 Brandon FL 33510**

Mailing Address

**109 Central Drive
 Brandon FL 33510**

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

59-3250297

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**Figueroa, NELSON
 109 Central Dr
 Brandon, FL 33510**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

TITLE	PSDT	<input type="checkbox"/> Delete
NAME	NELSON, Figueoa	
STREET ADDRESS	109 Central Dr	
CITY-ST-ZIP	Brandon FL 33510	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-23-2000 813 665-3918

Date

Daytime Phone #

CR2E034 (9/99)

Nelson Enterprise of Tampa, Inc.

109 Central Drive, Brandon, FL 33510
813-689-7202

page 2 of 2
Attachment
OFF P9700030660
DW81436

July 12, 2000

Department of State

Division of Corporation

P.O. Box 6327

Tallahassee, FL 32314

Re: Corp # P9700030660

Dear Officers:

Per our telephone conversation, I am sending you \$150.00 of annual fees. This year I did not received my annual report. Please send me the UBR 2000 .

If you have any question please call me at 813-661-3918

Sincerely yours,

Nelson Figueroa
President.