

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P97000031253

1. Entity Name

R S Superstores, Inc

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90180 015 ***150.00

Principal Place of Business

Mailing Address

703 Panferio
Pensacola Bch FL 32561

2. Principal Place of Business

703 Panferio
Suite, Apt. #, etc.

3. Mailing Address

703 Panferio
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pensacola Bch FL

Zip Country

32561 Escambia

City & State

Pensacola Bch FL

Zip Country

32561 Escambia

4. FEI Number

59-3440481

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Robert W Smith
2704 Glen Oak Cr
Gulf Breeze FL 32561

7. Name and Address of New Registered Agent

Name

Chase W Smith

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

2704 Glen Oak Cr

City

Gulf Breeze

FL

Zip Code

32561

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

Chase W Smith

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

(NOTE: Registered Agent signature required when reinstating)

4/11/00

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 \$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
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Robert W Smith
2704 Glen Oak Cr
Gulf Breeze FL 32561

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V P
Chase W Smith
2704 Glen Oak Cr
Gulf Breeze FL 32561

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

Chase W Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

DATE

850 934-7300

Daytime Phone #

CR2E034 (9/99)