

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000056038

1. Entity Name

ROGER'S MARINE SERVICE, INC.



FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90024 047 ***150.00

Principal Place of Business

16002 ARMISTEAD LANE
ODESSA FL 33556

Mailing Address

16002 ARMISTEAD LANE
ODESSA FL 33556

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

59-3448332

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

TAN, ROGER W
16002 ARMISTEAD LANE
ODESSA FL 33556

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 \$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 ☐ Delete
NAME P
STREET ADDRESS TAN, ROGER W
CITY-ST-ZIP 16002 ARMISTEAD LN
ODESSA FL 33556

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ 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 Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-31-00

813-240-4904

CR2E034 (5/00)

Received and notice for Business Report.

Check records, call bank to check on
check. ~~Set~~ Has not cleared. Call ph. #

850-488-9000 - to check on status. The

lady check records found no sign of record paid.
Told me to send copy's of my record copy's of form

4 check stub and another check for \$150.00

send to Correspondence Address.

1702
L. J. & S. J. & S. J.

ATTACHMENT

P97000056039

2000 UNIFORM BUSINESS REPORT (UBR)

1072 attachment
P97000056038
B0104422

0397675

DOCUMENT # P97000056038

1. Entity Name

ROGER'S MARINE SERVICE, INC.

Principal Place of Business

Mailing Address

16002 ARMISTEAD LANE
ODESSA FL 33556

16002 ARMISTEAD LANE
ODESSA FL 33556-3301

2. Principal Place of Business

3. Mailing Address

State, Apt. #, etc

State, Apt. #, etc

City & State

City & State

4. FEI Number 59-3448332

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TAN, ROGER W
16002 ARMISTEAD LANE
ODESSA FL 33556

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 by and or printed name of registered agent and filer if applicable

Signature by and or printed name of officer or director if applicable

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 NAME STREET ADDRESS CITY-ST-ZIP	P TAN, ROGER W 16002 ARMISTEAD LN ODESSA FL 33556	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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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
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SIGNATURE: Roger W Tan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-00 813-240-4804

Filer

Entity's Printer #

CR 11/01/99