

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000061404**

1. Entity Name

METAL FRAMING & DRYWALL SERVICES, INC.**FILED**
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90085 026 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business 812 KELL-AIRE DRIVE DESTIN FL 32541		Mailing Address 812 KELL-AIRE DRIVE DESTIN FL 32541	
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 59-3457166		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
RONE, DAVID 812 KELL-AIRE DRIVE DESTIN FL 32541		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. I am familiar with, and accept the obligations of registered agent.

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, 2002 Fee 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	PTD RONE, DAVID K 812 KELL-AIRE DRIVE DESTIN FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RONE, TOM 812 KELL AIRE DR. DESTIN FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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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

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***9/11/02 (850) 974-5714**

CR2E034 (4/02)

Attachment

METAL FRAMING & DRYWALL SERVICES, INC.

**P.O. BOX 5302
DESTIN, FL 32540**

#P97000061404

September 11, 2002

TO: Florida Department of State
Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sirs/Mams,

We did not receive the initial notice for filing the 2002 Uniform Business Report. As provided for in the instructions, we request the late fee be waived. Please find attached our check for \$150 for the original filing fee amount.

Sincerely,

David K Rone

DAVID K. RONE
President, Metal Framing & Drywall Services, Inc.