

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State

0013130 AV

03-18-2002 90065 020 ***150.00

DOCUMENT # P97000064470

1. Entity Name

MASTERS ELECTRIC, INC. OF SOUTH DAYTONA

Principal Place of Business

1725 SOUTH NOVA ROAD C-1
SOUTH DAYTONA FL 32119

Mailing Address

1725 SOUTH NOVA ROAD C-1
SOUTH DAYTONA FL 32119

2. Principal Place of Business

505 Herbert ST.

Suite, Apt. #, etc.

3. Mailing Address

505 Herbert ST.

Suite, Apt. #, etc.

City & State

Port Orange, FL.

City & State

Port Orange, FL.

Zip

32129

Country

Volusia

Zip

32129

Country

Volusia

4. FEI Number

59-3456055

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MASTERS, GERALD E

1725 SOUTH NOVA ROAD C-1
SOUTH DAYTONA FL 32119

7. Name and Address of New Registered Agent

Name

Masters, Gerald E.

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

505 Herbert ST.

City

Port Orange

FL

Zip Code

32129

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

Gerald E. Masters

Gerald E. Masters PVST

2-20-02

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, 2002 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 PVST ☐ Delete
NAME MASTERS, GERALD E
STREET ADDRESS 1725 SOUTH NOVA ROAD C-1
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST ☒ Change ☐ Addition
NAME Masters, Gerald E.
STREET ADDRESS 505 Herbert ST.
CITY-ST-ZIP Port Orange, FL. 32129

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

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

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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:

Gerald E. Masters

Gerald Masters

2-20-02

386-304-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)