

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2002 8:00 am**  
**Secretary of State**

07-28-2002 90197 008 \*\*\*150.00

**DOCUMENT # P97000072421**

1. Entity Name

**COLE & SONS, ENTERPRISE, INC.**

Principal Place of Business

**10406 N. HARTTS DRIVE  
TAMPA FL 33617**

Mailing Address

**P.O. BOX 311506  
TAMPA FL 33680**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-3465186**

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

**COLE, KATHY L**

**205 W MLKING BLVD #204**

**TAMPA FL 33603**

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  
**D**  
**COLE, ARTHUR**  
**10406 N. HARTTS DRIVE**  
**TAMPA FL 33617** ☐ Delete

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

TITLE  
NAME  
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CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-26-2002**

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

# P9700007421  
122893

Cole & Son Enterprise, Inc.  
205 W. MLKing Blvd. #204  
Tampa, FL. 33603

July 26, 2002

RE: Cole & Son Enterprise, Inc.

Dear Sir:

Please be advised that Cole & Son Enterprise, Inc. did not receive the initial annual notice. Therefore, we are asking that you waive any additional fees at this time.

We are enclosing a check for \$150.00 in order the renew Cole & Son Enterprise, Inc. If you have any questions please call.

Respectfully,

Arthur L. Cole

Arthur L. Cole  
President