

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90246 014 ***150.00

DOCUMENT # P97000074219

1. Entity Name

DO-RIGHT GENERAL CONTRACTORS, INC.

Principal Place of Business

Mailing Address

~~400 SOUTHWEST 18TH COURT~~
~~POMPANO BEACH FL 33060~~

~~400 SOUTHWEST 18TH COURT~~
~~POMPANO BEACH FL 33060~~

UUUJJ0007

2. Principal Place of Business

3. Mailing Address

124 So Fed Hwy
Suite, Apt. #, etc.
Suite 203

P.O. Box 1115-33061
Suite, Apt. #, etc.

City & State
Pompano Beach, FL

City & State
Pompano Beach

4. FEI Number **65-0777045**

Applied For
Not Applicable

Zip
33062

Country
USA

Zip
33062

Country
USA

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

WALSH, PHYLLIS
400 SW 18 CT
POMPANO BCH FL 33060

Name
DONALD TABER

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

6590 VIA REGINA

City
Boca Raton

FL

Zip
33433

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 **X Donald Taber / Pres**

4/14/2001

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, 2001 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
PSTD
TABER, DONALD
400 SOUTHWEST 18TH COURT
POMPANO BEACH FL 33060

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
TABER, DONALD
6590 VIA REGINA
Boca RATON, FL 33433

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ Delete

TITLE
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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: **Donald Taber / Pres**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/2001 (954) 942-3002

Date Daytime Phone #

Donald Taber

(P.O. Box 1115-33061)

01233336

CR2E034 (10/00)