## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Jul 24, 2001 8:00 am Secretary of State P97000091429 DOCUMENT # 1. Entity Name 07-24-2001 90005 046 \*\*\*150 00 PMA ENTERPRISES, INC. Principal Place of Business Mailing Address 802 LAMONT PLACE **802 LAMONT PLACE** TEMPLE TERRACE FL 33617 TEMPLE TERRACE FL 33617 2. Principal Place of Bus 3. Mailing Address 11207 Stree DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State 59-3484282 temple Terrace Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name -HOLZMANN, GERARD C Street Address (P.O. Box Number is Not Acceptable) **802 LAMONT PLACE TEMPLE TERRACE FL 33617** Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Change ☐ Addition TITLE ☐ Delete TITLE HOLZMANN, GERARD NAME NAME STREET ADDRESS **802 LAMONT PLACE** STREET ADDRESS CITY-ST-7IP **TEMPLE TERRACE FL 33617** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED

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TO: Florida Department of State **Divisions of Corporations** Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302 - 1500

-1917 0000 9 1429

FR: Gerard C. Holzmann President/CEO PMA Enterprises, Inc. 11207 N. 56<sup>th</sup> Street Suite #4 Temple Terrace, FL 33617

To Whom It May Concern:

On July 18, 2001 I received my Uniform Business Report renewal form. It indicated that I was late and that I would be charged a late filing fee.

Please be aware that this is the first form of information I have received. I DID NOT receive and previous notices.

Our office has moved and the documents were sent to our old address.

When I received this notice I called the number listed on the bottom of the cover and spoke to one of your employees. They instructed me to write a letter explaining what has happened and to enclose a check for \$150.00.

If you have any questions please feel free to contact me at (800) 519 – 6875.

Thank you for your time.

Sincerely,

Gerard C. Holzmann

President/CEO

PMA Enterprises Inc.