

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90326 043 ***150.00

DOCUMENT # P97000094172

1. Entity Name

PolySolutions Corp

636207

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

2220 SW 11th Pl

Suite, Apt. #, etc.

City & State

Boca Raton, FL

Zip

33486

Country

FL

4. FEI Number

65-0796935

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Peter Schmidt

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

400 S Dixie Hwy

420

City

Boca Raton

FL

FL

Zip Code

33486

**DO NOT WRITE
IN THIS SPACE**

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 fee 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)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	D
NAME	H. Logan Pierson
STREET ADDRESS	2220 SW 11th Pl
CITY - ST - ZIP	Boca Raton, FL 33486
TITLE	P
NAME	Gloria Pierson
STREET ADDRESS	2220 SW 11th Pl
CITY - ST - ZIP	Boca Raton, FL 33486
TITLE	
NAME	
STREET ADDRESS	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Gloria Pierson
PolySolutions Corp

4/12/02 561-368-8888

Date

Daytime Phone #

CR2E034B (12/01)