

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90026 007 ***150.00

DOCUMENT # P97000100496

1. Entity Name

INSPECTION SERVICES OF SOUTH FLORIDA, INC.

Principal Place of Business

**2 SOUTH UNIVERSITY DR
 #327
 FT LAUDERDALE FL 33324**

Mailing Address

**P.O. BOX 162073
 MIAMI FL 33116**

2. Principal Place of Business

9245 SW 157 ST.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite 105

Suite, Apt. #, etc.

City & State

MIAMI

City & State

4. FEI Number

65-0797370

Applied For

Not Applicable

Zip

33157

Country

DADE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAUBMAN, ANDREW

**2 SOUTH UNIVERSITY DR
 #327
 FT LAUDERDALE FL 33324**

7. Name and Address of New Registered Agent

Name

GERALD E. CREASMAN

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

9245 SW 157 STREET

City

MIAMI

FL

Zip Code

33157

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. CREASMAN

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/21/02

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 **FLANAGAN, E R**
 STREET ADDRESS **25 UNIVERSITY DRIVE # 327**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33324**

TITLE ☐ Delete
 NAME **[Signature]**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 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 **FLANAGAN, E.R.**
 STREET ADDRESS **9245 SW 157 ST.**
 CITY-ST-ZIP **MIAMI, FL. 33157**

TITLE ☐ Change ☐ Addition
 NAME **[Signature]**
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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 an officer or trustee empowered.

SIGNATURE:

E. Robert Flanagan President

1-11-2002

305-388-3641

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)