

**2002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90394 029 ***150.00

DOCUMENT # P 980000 27978

1. Entity Name

UNLIMITED CONTRACTING, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

904 NW 3 Avenue

3. Mailing Address

4200 Inverrary Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#3302

City & State

FT. LAUDERDALE, FL

City & State

LAUDERHILL, FL

Zip

33311

Country

Zip

33319

Country

4. FEI Number

05-0882350

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Williams, Ernest

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

904 N.W. 3RD Avenue

City

FT. LAUDERDALE

FL

Zip Code

33311

**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 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) ☐

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 NAME STREET ADDRESS CITY-ST-ZIP	D Williams, Ernest 904 NW 3 Avenue FT. LAUDERDALE, FL. 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S/T MATHIS, Neil 904 NW 3 Avenue FT. LAUDERDALE, FL. 33311
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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 another has been empowered.

SIGNATURE: *Neil Mathis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

4/29/02

(954) 730-8760

Date

Daytime Phone #

CR2E034B (12/01)