

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 22, 2001 8:00 am
Secretary of State

02-22-2001 90003 015 ***150.00

DOCUMENT # P98000033555

1. Entity Name

PROGRESSIVE STAFFING II, INC.

Principal Place of Business

2469 ENTERPRISE ROAD
CLEARWATER FL 34623

Mailing Address

2469 ENTERPRISE ROAD
CLEARWATER FL 34623

2. Principal Place of Business

2469 ENTERPRISE RD.

3. Mailing Address

2469 ENTERPRISE RD.

Suite, Apt. #, etc.

STE B

Suite, Apt. #, etc.

STE B

City & State

CLEARWATER FL

City & State

CLEARWATER FL

Zip
33763

Country
USA

Zip
33763

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3509836

Applied For

Not Applicable

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

TINGIRIDES, STAVROS

2469 ENTERPRISE RD

SUITE B

CLEARWATER FL 33763

Name

STAVROS TINGIRIDES, ESQ

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

804 N. BELCHER RD.

STE 100

City

CLEARWATER

FL

Zip Code

33765

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)

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 DP ☐ Delete
NAME DRIS, MICHAEL E ESQ
STREET ADDRESS 2469 ENTERPRISE RD STE B
CITY-ST-ZIP CLEARWATER FL

TITLE DP ☒ Change ☐ Addition
NAME MICHAEL E. DRIS, ESQ.
STREET ADDRESS 2469 ENTERPRISE RD., STE B
CITY-ST-ZIP CLEARWATER FL 33763

TITLE DS ☐ Delete
NAME PARIANOS, IRINI
STREET ADDRESS 2469 ENTERPRISE RD STE B
CITY-ST-ZIP CLEARWATER FL

TITLE DS ☒ Change ☐ Addition
NAME IRINI K. PARIANOS
STREET ADDRESS 2469 ENTERPRISE RD., STE B
CITY-ST-ZIP CLEARWATER FL 33763

TITLE DVP ☐ Delete
NAME TINGIRIDES, STAVROS
STREET ADDRESS 2469 ENTERPRISE ROAD SUITE B
CITY-ST-ZIP CLEARWATER FL 33763

TITLE DVP ☒ Change ☐ Addition
NAME STAVROS TINGIRIDES ESQ
STREET ADDRESS 804 N. BELCHER RD., STE 100
CITY-ST-ZIP CLEARWATER FL 33765

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL E. DRIS, PRES

Date

2/5/01

Daytime Phone #

(727) 712 9121

CR2E034 (10/00)