## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 17, 2001 8:00 am Secretary of State DOCUMENT # P98000039701 FERREIRA MECHANICAL, INC. 04-17-2001 90087 048 \*\*\*150.00 Principal Place of Business Mailing Address ~1951 LANIER COURT 1951 LANIER COURT WINTER PARK FL 32792 WINTER PARK FL 32792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 59-3512375 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name FERREIRA, DENNIS Jumber is Not Acceptable) 1951 LANIER COURT WINTER PARK FL 32792 LAST NAME MISPELLED Zip Code or both, in the State of Florida. 8. The above named entity submits this statement SIGNATURE Signature, typed or printed name of registered ag 9. This corporation is eligible to satisfy its Intangi \$5.00 May Be 0. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 1 cc will Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition SR2E034 (10/00) Delete TITLE TITLE FERREIRA, DENNIS NAME NAME STREET ADDRESS STREET ADDRESS 1951 LANIER COURT CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32792 TITLE Change ☐ Addition ☐ Delete TITLE NAME TRICK, TIMOTHY NAME IRICK, TIMOTHY STREET ADDRESS 1041 LANDMARK LN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CASSELBERRY FL 32707 TITLE Delete Change Addition: FERREIRA, JOYCE L NAME STREET ADDRESS 1951 LANIER COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32792 TITLE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition 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 if changed, or on an attachment with an address, with all other like empowered.