

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0117471 AV

DOCUMENT # **P98000065933**

1. Entity Name
MARTIN'S A/C SERVICE, INC.



FILED

03 JUL 28 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**5781 SW MARKEL ST
PALM CITY FL 34990
US**

Mailing Address
**5781 SW MARKEL ST
PALM CITY FL 34990
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0854989**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JARVIS, MARTIN T
5781 MARKEL ST
PALM CITY FL 34990**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

7/22/03

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **JARVIS, MARTIN T**
STREET ADDRESS **5781 SW MARKEL ST**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE ☐ Change ☐ Addition
NAME **600022166326**
STREET ADDRESS **08/08/03--01038--029**
CITY-ST-ZIP ****150.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 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

Date

Daytime Phone #

7/22/03 772-285-8180

CR2E034 (4/03)

Attachment # PA8000065933

MARTIN'S A/C SERVICE, INC.
5781 S.W. Markel St.
Palm City, FL 34990

7/22/03

Florida Dept. Of State
Division of Corporations

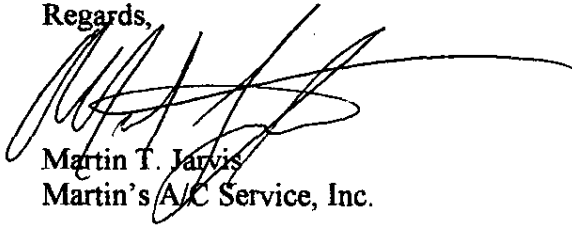
Reinstatement Dept.

Back in April, I received the renewal notice for the uniform business report, which I filled out and wrote my company check number 0224 dated April 4th, 2003, and mailed.

That was the last I expected of this as I had carefully filled out the form, and mailed in the \$150.00 fee. Surprise! I received a second notice saying I didn't send in the report and now its going to cost me \$550.00 because someone beside myself didn't do their job and I get the short end as its is said.. Perhaps the US Mail or an opps somewhere else ?

Anyway, I contacted the bank and the check hasn't been presented for payment, so seeing as I sent it on the 5 the of April, I would think it's lost. So, I am sending this new form all filled out and another check for \$150.00. Ok? Thank you for your time and I am probably not the first with this story, but "that's the truth", and I'm sticking with it. Should you need to contact me further, its 772-285-8180, my cell ph.

Regards,



Martin T. Jarvis
Martin's A/C Service, Inc.