

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2002 8:00 am
Secretary of State

02-14-2002 90043 048 ***150.00

DOCUMENT # P98000068102

1. Entity Name

EVERGREEN SALES & SERVICE, INC.

Principal Place of Business

**108 W SENECA AVE
 UNIT # 60
 TAMPA FL 33612**

Mailing Address

**P.O. BOX 20332
 TAMPA FL 33622-0332**

2. Principal Place of Business

3734 131st AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER FL

City & State

4. FEI Number

59-3730845

Applied For

Not Applicable

Zip

33762

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BALDOROSS, RAYMOND F JR
 108 W SENECA AVE
 UNIT # 60
 TAMPA FL 33612**

7. Name and Address of New Registered Agent

Name **RAYMOND F BALDOROSS JR.**

Street Address (P.O. Box Number is Not Acceptable)
3734 131st AVE

#2

City **CLEARWATER**

FL

Zip Code

33762

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

Raymond F Baldoross Jr

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

(NOTE: Registered Agent signature required when reinstating.)

1/16/02

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 **P** ☐ Delete
 NAME **BALDOROSS, RAYMOND F JR.**
 STREET ADDRESS **6018 S 6TH ST**
 CITY-ST-ZIP **TAMPA FL 33611**

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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:

Raymond F Baldoross Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/02 (727) 573-2600

Date

Daytime Phone #

CR2E034 (9/01)