

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90081 028 ***158.75

DOCUMENT # P98000079386

1. Entity Name

SILENT SERVICES, CORP.

Principal Place of Business

2632 CAYMAN WAY
 WINTER PARK FL 32792

Mailing Address

2632 CAYMAN WAY
 WINTER PARK FL 32792

2. Principal Place of Business

7044 STAPPOINT CT.

3. Mailing Address

7044 STAPPOINT CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WINTER PARK, FL

City & State

WINTER PARK, FL

4. FEI Number

59-3534821

Applied For

Not Applicable

Zip

32792

Country

USA

Zip

32792

Country

USA

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMPE, RICHARD L
 2632 CAYMAN WAY
 WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

MARK KRAMPE

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

7044 STAPPOINT CT.

City

WINTER PARK,

FL

Zip Code

32792

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 MARK KRAMPE PRESIDENT

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

TITLE ~~D~~ ~~KRAMPE, RICHARD~~ ~~2632 CAYMAN WAY~~ ~~WINTER PARK FL 32792~~ ☒ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~D/P~~ ~~MARK KRAMPE~~ ~~7044 STAPPOINT CT.~~ ~~WINTER PARK, FL 32792~~ ☒ Change ☒ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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: MARK KRAMPE
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01
 Date

407-692-5935
 Daytime Phone #

CR2E034 (10/00)