

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90265 018 ***150.00

DOCUMENT # P98000085124

1. Entity Name

TOTAL EQUIPMENT SOLUTIONS, INC.

Principal Place of Business

Mailing Address

9470 ULMERTON ROAD SUITE 4C
LARGO FL 33771
US

9470 ULMERTON ROAD SUITE 4C
LARGO FL 33771-3700
US

2. Principal Place of Business

14948 NEWPORT ROAD

3. Mailing Address

14948 NEWPORT ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 101

SUITE 101

City & State

City & State

CLEARWATER, FL

CLEARWATER, FL

Zip

Country

Zip

Country

33764

33764



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3535914

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

REISSMAN, MARSHALL G
5001 W. CYPRESS STREET SUITE 200
TAMPA FL 33607

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.

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, 2000 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 ~~VSD~~ ☒ Delete
NAME ~~SMITH, TODD~~
STREET ADDRESS ~~9470 ULMERTON ROAD SUITE 4C~~
CITY-ST-ZIP ~~LARGO FL 33771~~

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

TITLE PTD ☐ Delete
NAME TIMKO, THOMAS M SR.
STREET ADDRESS 9470 ULMERTON ROAD SUITE 4C
CITY-ST-ZIP LARGO FL 33771

TITLE P, S, T, O ☒ Change ☐ Addition
NAME
STREET ADDRESS 14948 NEWPORT ROAD, SUITE 101
CITY-ST-ZIP CLEARWATER, FL 33764

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/00 (727) 536-3783
Date Daytime Phone #

CR2E034 (9/99)