

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90134 011 ***150.00

DOCUMENT # P98000095434

1. Entity Name
B CREATIVE SERVICES, INC.

Principal Place of Business
**P.O. BOX 1445
JACKSONVILLE FL 32201**

Mailing Address
**P.O. BOX 1445
JACKSONVILLE FL 32201**

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 **59-3541522**

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

**SANDBERG, BRADON F
700 E. UNION STREET
SUITE F2B
JACKSONVILLE FL 32206**

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 ☐ Delete
NAME **D**
STREET ADDRESS **SANDBERG, BRANDON F**
CITY-ST-ZIP **P.O. BOX 1445 N/A
JACKSONVILLE FL 32201**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Brandon F Sandberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-20-02 904-220-0107

CR2E034 (4/02)

Attachment

6076640
P98000098434



BCS Computer Services, Inc.

July 20, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32202-1500

To Whom It May Concern:

I am attaching this letter to my 2002 Uniform Business Report at the suggestion of Tyranny, from your office, whom I spoke to on July 17th at 11:30am.

This Filing request is the first we have received this year. Since I did not receive this Business Report filing request before the June deadline, I request that you wave the late fee. Enclosed is my completed filing along with a check for \$150.00.

Please check your records and verify that all mailings are sent to the mailing address and not the street address, as we do not have mail service at our physical location.

Thank you for your time.

Sincerely,

Brandon F. Sandberg
President