

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101489

1. Entity Name

PRESTIGE COMMERCIAL SERVICES, INC.

FILED
Apr 23, 2000 8:00 am
Secretary of State

04-23-2000 90042 009 ***150.00

Principal Place of Business

Mailing Address

7712 N. COARSEY DR.
TAMPA FL 33604

7712 N. COARSEY DR.
TAMPA FL 33604-4663

2. Principal Place of Business

7535 N. Armenia Ave.

3. Mailing Address

P.O. Box 270571

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

59-3546168

Applied For

Not Applicable

Zip

33604

Country

Hillsborough

Zip

33688

Country

Hillsborough

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

STIEPIEN, HENRYK
7712 N. COARSEY DR.
TAMPA FL 33604

Name

Piotr Zwolinski

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

7535 N. Armenia Ave

City

Tampa

FL

Zip Code

33604

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.

Piotr Zwolinski

(NOTE: Registered Agent signature required when reinstating)

4/17/00

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 P
NAME STEPHEN, HENRY K
STREET ADDRESS 7712 N COARSEY DR.
CITY-ST-ZIP TAMPA FL 33604

☐ Delete

TITLE
NAME Stephen, Teresa
STREET ADDRESS 7535 N. Armenia Ave.
CITY-ST-ZIP Tampa, FL 33604

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00 (813) 933-1275

Date

Daytime Phone #

CR2E034 (9/99)