

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000105272

1. Entity Name

MAJORS HOME IMPROVEMENT, INC.

Principal Place of Business

6204 SILVER OAK DRIVE
MILTON FL 32570

Mailing Address

6204 SILVER OAK DRIVE
MILTON FL 32570

2. Principal Place of Business

4646 Parkmore Plaza Dr
Suite, Apt. #, etc.
Unit 46

3. Mailing Address

PO Box 4174
Suite, Apt. #, etc.

City & State
Milton, FL

City & State
Milton, FL

Zip
32570

Country
USA

Zip
32572-4174

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

~~59-3497058~~
59-3646429

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

MAJORS, MICHAEL S II
6204 SILVER OAK DRIVE
MILTON FL 32570

Name

Michael S Majors

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

4662 Magnolia Hill Ct

City

Atlantic Beach

FL

Zip Code
32571

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

Michael S Majors II

2/9/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT
NAME MAJORS, MICHAEL S II
STREET ADDRESS 6204 SILVER OAK DRIVE
CITY-ST-ZIP MILTON FL 32570 ☐ Delete

TITLE PT
NAME Michael S Majors II
STREET ADDRESS 4662 Magnolia Hill Ct
CITY-ST-ZIP Atlantic Beach, FL 32571 ☒ Change ☐ Addition

TITLE V
NAME MAJORS, MICHAEL S
STREET ADDRESS 5726 DORIS ST
CITY-ST-ZIP MILTON FL 32570 ☐ Delete

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

TITLE S
NAME KING, TYSON
STREET ADDRESS 4917 MATHREW RD
CITY-ST-ZIP PENSACOLA FL 32514 ☒ Delete

TITLE Secretary
NAME Tonya B. Majors
STREET ADDRESS 4662 Magnolia Hill Ct
CITY-ST-ZIP Atlantic Beach, FL 32571 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

Michael S Majors II

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/01

Date

850-983-2899

Daytime Phone #

CR2E034 (10/00)