

# 2000 UNIFORM BUSINESS REPORT (UBR)

3/1

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

03-13-2000 90012 017 \*\*\*150.00

**DOCUMENT # P99000014763**

1. Entity Name

UNIVERSAL SURFACING SYSTEMS, INC.

Principal Place of Business

2550 RIGEL ROAD  
 VENICE FL 34293

Mailing Address

2550 RIGEL ROAD  
 VENICE FL 34293-3200

2. Principal Place of Business

530 US41 By-Pass So.

Suite, Apt., etc.

Suite 24 B

City & State

Venice, Fl.

Zip 34292

Country

Sarasota

3. Mailing Address

530 US 41 By-Pass So.

Suite, Apt., etc.

Suite 24 B

City & State

Venice, Fl.

Zip 34292

Country

Sarasota



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0896921

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

IZZO, JOHN P  
 180 NO. INDIANA AVENUE - SUITE #5  
 ENGLEWOOD FL 34223

7. Name and Address of New Registered Agent

Name

Julie Parry

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

530 US 41 By-Pass South Suite 24B

City Venice

FL

Zip Code 34292

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 restate)

3/7/2000

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

TITLE	President/Sec'y	<input type="checkbox"/> Delete
NAME	E. Joseph Parry	
STREET ADDRESS	2550 Rigel Rd.	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	Vice President Adm&Sales	<input type="checkbox"/> Delete
NAME	Julie A. Parry	
STREET ADDRESS	530 US 41 By-Pass So., 24B	
CITY-ST-ZIP	Venice, FL 34292	
TITLE	Treasurer	<input checked="" type="checkbox"/> Delete
NAME	Joyce A. Parry	
STREET ADDRESS	2550 Rigel Rd.	
CITY-ST-ZIP	Venice, FL 34292	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

E. Joseph Parry President

2/24/00 941-412-0676

Date

Daytime Phone #

CR2034 (9/99)