

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000018596

1. Entity Name

PD QUIK ENTERPRISES, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90030 042 ***150.00

Principal Place of Business

Mailing Address

1348 AUGUSTA NATIONAL BOULEVARD
WINTER SPRINGS FL 32708

1348 AUGUSTA NATIONAL BOULEVARD
WINTER SPRINGS FL 32708-4230

2. Principal Place of Business

3. Mailing Address

5703 RED BUG LAKE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#162

City & State

City & State

WINTER SPRINGS FL

4. FEI Number

59-3559374

Applied For

Not Applicable

Zip

Country

Zip

Country

32708

USA

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

DAVIS, BRADLEY J ESQ
SUNTRUST CENTER
200 S. ORANGE AVENUE, SUITE 1220
ORLANDO FL 32801

Name

DAVID E. HALL

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

1348 AUGUSTA NATIONAL BLVD.

City

WINTER SPRINGS FL

Zip Code

32708

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

1-26-00

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 ☐ Delete
NAME D
STREET ADDRESS HALL, DAVID E
CITY-ST-ZIP 1348 AUGUSTA NATIONAL BOULEVARD
WINTER SPRINGS FL 32708

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HALL, PEGGY G
CITY-ST-ZIP 1348 AUGUSTA NATIONAL BOULEVARD
WINTER SPRINGS FL 32708

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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, typed or printed name of signing officer or director
PEGGY G. HALL

Date

1-26-00

Daytime Phone #

407-366-6663

CR2E034 (9/99)