

2000 UNIFORM BUSINESS REPORT (UBR)

4

DOCUMENT # P99000020463

1. Entity Name

QUICK-TRAIN, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

04-21-2000 90001 005 ***150.00

Principal Place of Business

Mailing Address

507 S DELAWARE AVE
TAMPA FL 33606

507 S DELAWARE AVE
TAMPA FL 33709-3266

2. Principal Place of Business

6367 51ST AVE N

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SAME

City & State

ST PETERSBURG FL

City & State

ST PETERSBURG FL

Zip

33709

Country

FLORIDA

Zip

33709

Country

FLORIDA

4. FEI Number

59-3559952

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HOUCK, LINDA L
507 S DELAWARE AVE
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

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

6367 51ST AVE N

City

ST PETERSBURG

FL

Zip Code

33709

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

Linda L. Houck

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/13/00

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

TITLE PD
NAME HOUCK, LINDA L
STREET ADDRESS 507 S DELAWARE AVE
CITY-ST-ZIP TAMPA FL 33606

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

6367 51ST AVE N
ST PETERSBURG FL 33709

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Linda L. Houck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/00

DATE

727-548-9272

DAYTIME PHONE #

CR2E034 (9/99)