## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Jul 08, 2002 8:00 am Secrétary of State P99000026316 DOCUMENT # 1. Entity Name 07-08-2002 90232 048 \*\*\*150 00 HOME MAINTENANCE AND REPAIRS, INC. Principal Place of Business Mailing Address B0127153 262 N.E. 22ND STREET 262 N.E. 22ND STREET DELRAY BEACH FL 33444 DELRAY BEACH FL 33444 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0907072 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KIESLING, ROBERT A Address (P.O. Box Number is Not Acceptable) 210 CHIPPEWA SQUARE <u>N (anaress</u> **BOYNTON BEACH FL 33426** Bounton 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) E/LE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME Valiente, Jesus NAME 262 N.E. 22ND STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DELRAY BEACH FL 33444** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

andress, with all other like empowered

changed; or on an attachment with ar

SIGNATURE:

FILED

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|-------------|-----------------------------------|
| <del></del> | Document # P99000026316 1/102     |
|             | FEI # 65-0907072                  |
|             | I (Jesus Valiente) From           |
|             | Home Maintenance and Repairs Inc. |
|             | did not recived any Uniform       |
|             | Business Report in the mail I     |
|             | will pay the \$150.00. Please     |
|             | 6626666                           |
|             | correct this information.         |
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|             | Thank you.                        |
|             | Jeses Naviente                    |
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