

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000033313

1. Entity Name

PC FIXIT, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90436 033 ***150.00

Principal Place of Business

Mailing Address

1311 N. WESTSHORE BLVD., STE. 107
 TAMPA FL 33607

1311 N. WESTSHORE BLVD., STE. 107
 TAMPA FL 33607-4611

2. Principal Place of Business

3. Mailing Address

16907 FILLY LANE

16907 FILLY LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ODESSA FL

City & State

ODESSA FL

4. FEI Number

59-3570149

Applied For

Not Applicable

Zip

Country

33556

USA

Zip

Country

33556

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

BINDER, MARTIN

1311 N. WESTSHORE BLVD., STE. 107
 TAMPA FL 33607

Name

MARTY BINDER

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

14755 FEATHER COVE LANE

City

CLEARWATER

FL

Zip Code

33762

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

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 BINDER, MARTIN
 CITY-ST-ZIP 1311 N. WESTSHORE BLVD., STE. 107
 TAMPA FL 33607

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 14755 FEATHER COVE LANE
 CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☐ Delete
 NAME D
 STREET ADDRESS BRUCE, JANE
 CITY-ST-ZIP 1311 N. WESTSHORE BLVD., STE. 107
 TAMPA FL 33607

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 16907 FILLY LANE
 CITY-ST-ZIP ODESSA FL 33556

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 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 the empowered.

SIGNATURE:

FILED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARTIN BINDER 4/10/00 727-455-5672

CR2F034 (9/99)