

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000042538

1. Entity Name

MARK HOWARD ELECTRIC, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90034 018 ***150.00

Principal Place of Business

Mailing Address

2850 KAVALIER DRIVE
PALM HARBOR FL 34684
Palm

2850 KAVALIER DRIVE
PALM HARBOR FL 34684-4100
Palm

2. Principal Place of Business

2850 Kavalier Drive

3. Mailing Address

2850 Kavalier Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Harbor, FL

City & State

Palm Harbor, FL

4. FEI Number

59-3572568

Applied For

Not Applicable

Zip

34684

Country

USA

Zip

34684

Country

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

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

City

FL

Zip Code

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
HOWARD, MARK
2850 KAVALIER DRIVE
PALM HARBOR FL 34684

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

TITLE
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Palm
☐ Delete

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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)(j), 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:

Mark R. Howard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark Howard

1-13-00

Date

727-458-8914

or 727-786-1138

CR2E034 (9/99)