

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 11, 2000 8:00 am
Secretary of State

04-11-2000 90083 001 ***150.00
04-11-2000 90083 002 *****8.75

DOCUMENT # P99000046337

1. Entity Name

PREMIER BUILDING MAINTENANCE, INC.

Principal Place of Business

Mailing Address

1640 WICHITA BLVD. S.E.
PALM BAY FL 32909

PO BOX 100825
PALM BAY FL 32910-0825

2. Principal Place of Business

1640 WICHITA BLVD SE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 100825

Suite, Apt. #, etc.

City & State

Palm Bay, FL

Zip

32909

Country

USA

City & State

Palm Bay, FL

Zip

32910

Country

USA

4. FEI Number

59-3576146

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RASKETT, DEBORAH
1640 WICHITA BLVD. S.E.
PALM BAY FL 32909

7. Name and Address of New Registered Agent

Name

Deborah RASKETT

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

1640 WICHITA BLVD SE

City

Palm Bay

FL

Zip Code

32909

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 Deborah RASKETT

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

Deborah RASKETT

(NOTE: Registered Agent signature required when reinstating)

3-30-00

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 NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

President
Deborah RASKETT
1640 WICHITA BLVD SE
Palm Bay, FL 32909

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: Deborah RASKETT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-00 407-728-1245

Date

Daytime Phone #

CR2E034 (9/99)