

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91435 008 ***150.00

DOCUMENT # P99000070229

1. Entity Name
B&R ELECTRIC SCOOTERS & LIFT CHAIRS INC



Principal Place of Business
**406 MAIN ST
TITUSVILLE, FL 32796**

Mailing Address
**406 MAIN ST
TITUSVILLE, FL 32796**

2. Principal Place of Business
2416 S. Washington Ave
Suite, Apt. #, etc.

3. Mailing Address
2416 S. Washington Ave
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Titusville, FL
Zip
32780
Country
USA

City & State
Titusville, FL
Zip
32780
Country
USA

4. FEI Number
59-3593208

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALVUT, RANDOLPH T
406 MAIN ST
TITUSVILLE, FL 32796**

7. Name and Address of New Registered Agent

Name
LOUIS VENUTI
Street Address (P.O. Box Number is Not Acceptable)
400 ORANGE ST
City
TITUSVILLE FL Zip Code
32796

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.

SIGNATURE

[Signature]

LOUIS VENUTI

4-30-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
ALVUT, RANDOLPH T
2416 S WASHINGTON AVE
TITUSVILLE, FL 32780** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVS
ALUNT, BRANDY G.
2416 S WASHINGTON AVE
TITUSVILLE, FL 32780** ☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-03

Date

Daytime Phone #

CR2E034 (10/02)