

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000083192

1. Entity Name

R & D ACQUISITION, INC. MACHINE AND
ENGINEERING, INC

Principal Place of Business

Mailing Address

5157 SAN JOSE STREET
TAMPA FL 33629

5157 SAN JOSE STREET
TAMPA FL 33629-6414

2. Principal Place of Business

130 SCARLET BLVD

3. Mailing Address

130 SCARLET BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OLDSMAR, FL

City & State

OLDSMAR, FL

4. FEI Number

59-3607927

Applied For

Not Applicable

Zip

34677-3002

Country

USA

Zip

34677-3002

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

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	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	☐ Change ☒ Addition
NAME	PRESIDENT
STREET ADDRESS	CARL W WHITLEY
CITY-ST-ZIP	130 SCARLET BLVD OLDSMAR, FL 34677-3002
TITLE	☐ Change ☒ Addition
NAME	UFO/SECRETARY
STREET ADDRESS	HILARY WHITLEY
CITY-ST-ZIP	130 SCARLET BLVD OLDSMAR, FL 34677-3002
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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 like empowered.

SIGNATURE:

CARL W WHITLEY 1/10/00 813-891-9109

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

FILED

Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90225 036 ***150.00