1 of 2

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087820

1. Entity Name
PREMIER FACILITY MANAGEMENT, INC.

Principal Place of Business | Mailing Address

FILED
00 DEC 15 AM 11: 17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business		3. Mailing Address	
2740 BUSINESS CENTER		2740 BUSINESS CENTER	
Suite, Apt #, etc. BLVD. UNIT #3		Suite, Apt #, etc. BLVD. UNIT #3	
City & State MELBOURNE FL		City & State MELBOURNE FL	
Zip 32940	Country USA	Zip 32940	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3604556 ☐ Applied For ☐ Not Applicable

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 BRONISLAW CHANOWSKI
Street Address (P.O. Box Number is Not Acceptable) 4287 WOODHALL CIR.
City VIERA FL Zip Code 32955

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 X Bronislaw Chrzanowski 12-01-00
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	P DOMINIKA CHOWANIEC 2721 CARIBBEAN ISLE BLVD #2316 MELBOURNE FL 32935 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BRONISLAW CHRZANOWSKI 4287 WOODHALL CIR. VIERA FL 32955 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: X [signature] BRONISLAW CHRZANOWSKI 12-01-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

File # P99000087820

Dear Madam, Sir,

Along with this letter we are sending the 2000 Uniform Business Report (UBR) for *Premier Facility Management, Inc.*

We have not received the initial mailing of the UBR, therefore we are sending you this form with the check for the amount of $150.00.

We ask that, you accept this form together with the check and respectfully request, that you wave any penalties.

Your cooperation in this matter will be gratefully appreciated.

Sincerely,

Bronislaw Chrzanowski
President