

DOCUMENT # P 99000089801

Entity Name
Thomas and Son Marine Inc.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90016 031 ***150.00

Principal Place of Business Mailing Address
2790 60th Ave. North 2790 60th Ave. North
St. Petersburg, FL. 33714 St. Petersburg, FL. 33714

60083996

2. Principal Place of Business 3. Mailing Address
4034 39th Ave. North 4034 39th Ave. North
Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
St. Petersburg, FL. St. Petersburg, FL.
Zip Country Zip Country
33714 Pinellas 33714 Pinellas

4. FEI Number Applied For
593602617 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

Account & Tax Help, Inc.
8668 Park Blvd. Suite A.
Seminole, FL. 33777

Name Richard Thomas
Street Address (P.O. Box Number is Not Acceptable)
4034 39th Ave. North
City St. Petersburg, FL Zip Code 33714

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 *Richard Thomas*
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-26-2000
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

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

PVST Richard Thomas 4034 39th Ave. North St. Petersburg, FL. 33714	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 furnished 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.

NATURE: *Richard Thomas* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-2000 (727) 550-0111
Date Daytime Phone #

CR2E034 (9/99)