

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90018 031 ***150.00

DOCUMENT # P99000091219

1. Entity Name

BUSINESS IMPROVEMENT SOLUTIONS, INC.

Principal Place of Business

**6265 BERTRAM DRIVE
MELBOURNE FL 32955**

Mailing Address

**POST OFFICE BOX 411182
MELBOURNE FL 32941**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3607552

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WEBBER, DALE S
401 E. JACKSON STREET
SUITE 2500
TAMPA FL 33602**

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, 2002 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	D	<input type="checkbox"/> Delete
NAME	PANKEY, DON F	
STREET ADDRESS	6265 BERTRAM DRIVE	
CITY-ST-ZIP	MELBOURNE FL 32955	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/02 321-258-3895

Date

Daytime Phone #

CR2E034 (9/01)



Buchanan Ingersoll

ATTORNEYS

Dale S. Webber

813-222-8187

webberds@bipc.com

Attachment
904770
Doct P998008 9/2/19

January 8, 2002

VIA FIRST CLASS MAIL

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

PRINCIPAL LOCATIONS

PHILADELPHIA

PITTSBURGH

PRINCETON

LONDON

MIAMI

BUFFALO

NEW YORK CITY

HARRISBURG

TAMPA

WASHINGTON, DC


Re: Business Improvement Solutions, Inc.

To Whom It May Concern:

Enclosed please find the 2002 Uniform Business Report as completed and executed relative to Business Improvement Solutions, Inc., a Florida business corporation. Also enclosed is a check in the amount of \$150.00 to cover the appropriate filing fee.

Please do not hesitate to contact me with any questions regarding the enclosed.

Very truly yours,


Dale S. Webber

Enclosures