

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90048 003 ***150.00

MA176250 AV

DOCUMENT # P99000098818

1. Entity Name

A & B COMMUNICATION SERVICES CO.

Principal Place of Business

10511 FLORENCE AVENUE LOT 422
THONOTOSASSA FL 33592

11616 Boki LANE
THONOTOSASSA, FL 33592

Mailing Address

POST OFFICE BOX 447
THONOTOSASSA FL 33592

2. Principal Place of Business

11616 Boki LANE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 447

Suite, Apt. #, etc.

City & State

THONOTOSASSA, FL

City & State

THONOTOSASSA FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33592

Country

HILLBOROUGH

Zip

33592

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SYLVESTER, BENNY
10511 FLORENCE AVE
THONOTOSASSA FL 33592

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 **PTD** ☐ Delete
 NAME **SYLVESTER, BENNY**
 STREET ADDRESS **10511 FLORENCE AVENUE, LOT 422**
 CITY-ST-ZIP **THONOTOSASSA FL 33592**

TITLE **SVD** ☐ Delete
 NAME **BENOIT, EDWINA**
 STREET ADDRESS **10511 FLORENCE AVENUE, LOT 422**
 CITY-ST-ZIP **THONOTOSASSA FL 33592**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Benny Sylvester

2-4-2002 813-986-7978

CR2E034 (9/01)

Attachment

DOC# P99000098818

60034748

To whom it may concern.

Please note the physical address of A+B

has changed 11616 Boki Lane, Thousand, 91335

The mailing address has stayed the same.

Please mail receipt if possible to

A+B Comm.

P.O. Box 447

Thousand, 91335