2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000100623

1. Entity Name

D W INDUSTRIAL SERVICES INC.

1856 DEBUTANTE DR. JACKSONVILLE FL 32246

Principal Place of Business

Mailing Addréss

1856 DEBUTANTE DR. JACKSONVILLE FL 32246-2604

FILED Jan 24, 2000 8:00 am Secretary of State

01-24-2000 90101 010 ***150.00

B0006641



2. Principal Place of Business		3. Mailing Address				I HOOKE HILL BEEK OKKE TO HOOK HOOK HOOK HOOK HOOK HOOK TO HOOK HOOK				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State Tack Sonville, FL.		City & State			4. 5	4. FEI Number 59 - 3605940			Applied For Not Applicable	
32246	Country DUVAL	Zip . Count		у	5. (Certificate of Status Desired		\$8.75 Ad Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
					Name					
DALTON, KENNETH D 1856 DEBUTANTE DR. JACKSONVILLE FL 32246				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										
						Ţ				
 This corporation is elig Tax filing requirement (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 St.			50.00	10. Election Campaign Fin Trust Fund Contribution			00 May Be ed to Fees		
11.	OFFICERS AND D	RECTORS	12.		AD	DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 11	
STREET ADDRESS 1856 D	±eut zty D.DaHou ebułante Pr onville, FL. 322:	□ Delete	TITLE NAME STREE	T ADDRESS				☐ Change	☐ Addition	
TITLE VICE POR STREET ADDRESS 2308	estdent	Delete		T ADDRESS ST-ZIP				☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	Delete -			T ADDRESS ST-ZIP	Treat Richo 7616	Treasurer Change A Richard T. Holder 7616 Munhall Drive Sacksonville FL 32216				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP		•	•	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP 13. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	e information supplied with th	☐ Delete	CITY-	T ADDRESS St- <i>zip</i>	ed in Section	119.07(3)(i), Florida Statutes.	further cer	Change		

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:

Date

Daytime Phone #