

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000102035

1. Entity Name

MILDRED MOORE AND COMPANY, INC.

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FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90032 026 ***150.00

Principal Place of Business

1106 KIRKLAND DRIVE
TAMPA FL 33619

Mailing Address

1106 KIRKLAND DRIVE
TAMPA FL 33619

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3607634

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

MOORE, MILDRED V
1106 KIRKLAND DRIVE
TAMPA FL 33619

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
MOORE, MILDRED V
1106 KIRKLAND DRIVE
TAMPA FL 33619

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
MOORE, ROBERT L SR.
1106 KIRKLAND DRIVE
TAMPA FL 33619

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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)(f), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/28/00

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
P99000102035
A0079175


MILDRED MOORE AND COMPANY, INC.
1106 KIRKLAND DR.
TAMPA, FL 33619
Tel. (813) 623-6020

Florida Department of State
P.O. Box 6327
Tallahassee, FL 33569

Dear Sir:

I am writing this letter as directed by your staff to explain why I did not file the UBR by May 1, 2000. Mildred Moore and Company, Inc. is a new corporation that was chartered in 1999. I was unaware of the UBR reporting requirements and since I did not receive a blank report from your office that would have put me on notice, I failed to file the report. Please waive the penalty associated with failure to file on time. As your staff instructed me, I am enclosing a check for \$150.00.

Thank you for your consideration in this matter.


Mildred Moore, President

September 1, 2000