

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000102192

1. Entity Name

GRZEGORZ MERTYNA SERVICES INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90069 040 ***150.00

Principal Place of Business

~~3315 HUNY CLUB DR.
CLEARWATER FL 33761~~

Mailing Address

~~3315 HUNY CLUB DR.
CLEARWATER FL 33761~~

2. Principal Place of Business

2519 McMULLEN BOOTH RD.

3. Mailing Address

← SAME

Suite, Apt. #, etc.

SUITE 510/138

Suite, Apt. #, etc.

City & State

CLEARWATER

City & State

Zip

33761

Country

Zip

Country

4. FEI Number

59-3608467

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MERTYNA, GRZEGORZ
3315 HUNY CLUB DR.
CLEARWATER FL 33761

7. Name and Address of New Registered Agent

Name

MICHAEL PASEK

Street Address (P.O. Box Number is Not Acceptable)

4851 85TH AVE.

City

PINELLAS PARK

FL

Zip Code

33781

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

Michael PASEK

REG. AGENT

4/24/00

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

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS MERTYNA, GRZEGORZ
CITY-ST-ZIP 3315 HUNY CLUB DR.
CLEARWATER FL 33761

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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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

☒ Change ☐ Addition
NAME 2519 McMULLEN BOOTH RD, #510/138
STREET ADDRESS
CITY-ST-ZIP CLEARWATER, FL 33761

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

GRZEGORZ
MERTYNA

Date

Daytime Phone #

04/25/00