

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S12461

1. Entity Name

NORTHSIDE ENGINEERING SERVICES, INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90018 023 ***150.00

Principal Place of Business

Mailing Address

2907 STATE ROAD 590
SUITE 7
CLEARWATER FL 33759
US

2907 STATE ROAD 590
SUITE 7
CLEARWATER FL 33765-3954
US

2. Principal Place of Business

304 S. Belcher Road

Suite, Apt. #, etc.

Suite C

City & State

Clearwater, FL

Zip
33765

Country
US

3. Mailing Address

304 S. Belcher Road

Suite, Apt. #, etc.

Suite C

City & State

Clearwater, FL

Zip
33765

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3037773

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GHOVAEE, HOUSHANG
2907 STATE ROAD 590
SUITE 7
CLEARWATER FL 33759

7. Name and Address of New Registered Agent

Name

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

304 S. Belcher Road

Suite C

City Clearwater

FL Zip Code 33765

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, 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 P ☐ Delete
NAME GHOVAEE, HOUSHANG
STREET ADDRESS 2907 ST. ROAD 590, SUITE 7
CITY-ST-ZIP CLEARWATER, FL 33759

TITLE ST ☐ Delete
NAME ROUSH, KENNETH H
STREET ADDRESS 2097 STATE ROAD, SUITE 7
CITY-ST-ZIP CLEARWATER FL 33759

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 304 S. Belcher Rd Suite C
CITY-ST-ZIP Clearwater, FL 33765

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 304 S. Belcher Rd Suite C
CITY-ST-ZIP Clearwater, FL 33765

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NAME
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)(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:

Hou
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 20, 00

Date

Daytime Phone #