

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90132 048 ***150.00

0118003 A1

DOCUMENT # S46562

1. Entity Name
FLORIDA MOVERS, INC.

Principal Place of Business

**606 BAYBERRY DRIVE
 APARTMENT #4
 LAKE PARK FL 33403**

Mailing Address

**FLORIDA MOVERS INC:
 P.O. BOX 10451
 RIVIERA BEACH FL 33419**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0263023

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**WALKER, THURMAN
 606 BAYBERRY DRIVE
 APARTMENT #4
 LAKE PARK FL 33403**

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 12, 2001 Fee 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 **P** ☐ Delete
 NAME **WALKER, THURMAN**
 STREET ADDRESS **606 BAYBERRY DRIVE #4**
 CITY-ST-ZIP **LAKE PARK FL 33403**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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: *Thurman Walker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-14-01 (561) 863-9708

Date

Daytime Phone #

CR2E034 (5/01)

Attachment
546562
7752403

Florida Movers Inc.

P.O. BOX 10451

RIVIERA BEACH, FL 33419

561-863-9708 FAX: 561-863-3162

e-mail: flmovers@bellsouth.net

PBC #MO1-0113

September 14, 2001

Division of Corporations

Uniform Business Report Filings

P.O. Box 1500

Tallahassee, FL 32302-1500

To Whom It May Concern:

My name is Thurman Walker, president of Florida Movers Inc. My FEI Number is 65-0263023. I'm writing in reference to my 2001 *Uniform Business Report (UBR)*.

Enclosed with this letter is my report. The reason for this letter is because my 2001 UBR is late. The reason being is that I did not receive the first notice and I made the mistake of relying on my accountant to prepare and forward the second report notice that I received. Needless to say, I have since acquired a new accountant.

However, as a small businessman, the reinstatement fee of \$600.00 would be a serious blow to my company and I ask that my *UBR* be accepted with the enclosed \$150.00 fee.

Respectfully,



Thurman Walker

President

Florida Movers Inc.

Enclosure (1)