## 2000 UNIFORM BUSINESS REPORT (UBR)

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## **FILED DOCUMENT # \$46880** Mar 27, 2000 8:00 am 1. Entity Name **Secretary of State** R. J. PARKER SALES, INCORPORATED 03-27-2000 90086 015 \*\*\*150.00 Mailing Address Principal Place of Business 10116 HAMPTON PLACE 10116 HAMPTON PLACE TAMPA FL 33618-4237 TAMPA FL 33618 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-3053807 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Richard J. Parker SCOTT, HOWARD F., ESQ. Street Address (P.O. Box Number is Not Acceptable) **BAYSHORE EXECUTIVE PLAZA** 10116 Hampton Place 10800 BISCAYNE BLVD., SUITE 870 **MIAMI FL 33161** Zip Code Tampa, 33618-4237 8. The above named entity submits this statement for the purpo of changing its registered office or registered agent, or both, in the State of Florida. <u> March 22, 200</u>0 Richard\_J. Parker SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11, ☐ Change Addition D ☐ Delete TITLE TITLE PARKER, RICHARD NAME NAME 10116 HAMPTON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Addition ☐ Change ☐ Delete TITLE TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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

Richard - J. Parkers March 22, 2000 813-933-4238