

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **S72733**

1. Entity Name

R & D SUBWAYS, INC.

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90003 018 ***150.00

Principal Place of Business

Mailing Address

175 KASPER ST.
PERRY FL 32347

175 KASPER ST.
PERRY FL 32347-1603

0 4 0 0 0 0



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2057 S Bryon Butler
Suite, Apt. #, etc. Pkwy

3. Mailing Address

2175 Kasper St
Suite, Apt. #, etc.

City & State

Perry FL

City & State

Perry FL

4. FEI Number

59-3078454

Applied For

Not Applicable

Zip

32347

Country

Taylor

Zip

32347

Country

Taylor

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERR, RICHARD L.
175 KASPER ST.
PERRY FL 32347

7. Name and Address of New Registered Agent

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 \$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	DP	<input type="checkbox"/> Delete
NAME	HERR, RICHARD L.	
STREET ADDRESS	175 KASPER ST.	
CITY-ST-ZIP	PERRY FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HERR, RICHARD L.	
STREET ADDRESS	175 KASPER ST.	
CITY-ST-ZIP	PERRY FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	HERR, DENISE E.	
STREET ADDRESS	175 KASPER ST.	
CITY-ST-ZIP	PERRY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2175 Kasper St	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2175 Kasper St	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2175 Kasper St	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: RICHARD L. HERR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/00

FSO-514 7844

CR2E034 (9/99)