

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S94408

1. Entity Name

PROFESSIONAL CHEMICAL APPLICATIONS BY LEA'S INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90212 009 ***150.00

Principal Place of Business

Mailing Address

217 RIDGEWOOD
HOLY HILL FL 32117
US

P.O. BOX 1190
DAYTONA BEACH FL 32115-1190
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3098420**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEA, CATHY
784 SUGAR HOUSE DR
PORT ORANGE FL 32119

7. Name and Address of New Registered Agent

Name

Peggy J. Rossi

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

3756 Cardinal Blvd.

City

Daytona Beach,

FL

Zip Code
32127

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 PD
NAME LEA, CATHY ☒ Delete
STREET ADDRESS 217 RIDGEWOOD AVENUE
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE T
NAME LEA, CATHY ☒ Delete
STREET ADDRESS 217 RIDGEWOOD AVENUE
CITY-ST-ZIP HOLLY HILL FL 32117

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 PD ☐ Change ☐ Addition
NAME Peggy J. Rossi
STREET ADDRESS 3756 Cardinal Blvd.
CITY-ST-ZIP Daytona Beach, Fla. 32127

TITLE T ☐ Change ☐ Addition
NAME Peggy J. Rossi
STREET ADDRESS 3756 Cardinal Blvd
CITY-ST-ZIP Daytona Beach, Fla.

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

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

TITLE ☐ Change ☐ Addition
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: *Peggy J. Rossi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-13-00 *904-252-8143*

CR2E034 (9/99)