

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 27, 2003 8:00 am**  
**Secretary of State**

03-27-2003 90115 045 \*\*\*150.00

**DOCUMENT # 185642**

1. Entity Name  
**STOFIN CO., INC.**



Principal Place of Business  
**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH FL 33401  
US**

Mailing Address  
**ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH FL 33401  
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0782336**

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

**TABERNILLA, ARMANDO A  
ONE NORTH CLEMATIS ST  
SUITE 200  
WEST PALM BEACH FL 33401**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>HERNANDEZ, OSCAR R</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVS</b> <b>TABERNILLA, ARMANDO A</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP</b> <b>RECIO, ALBERTO S</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> <b>BLOMQUIST, ERIK J</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>FERNANDEZ, LUIS J</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVAS</b> <b>CARSON, DONALD W</b> <b>ONE NORTH CLEMATIS ST SUITE 200</b> <b>WEST PALM BEACH FL 33401</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

(CONTINUED)

**DEVAS**  Change  Addition  
**CARSON, DONALD W.**  
**One North Clematis St. Suite 200**  
**West Palm Beach, FL 33401**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Armando A. Tabernilla* **Armando A. Tabernilla, VP 3/5/03 561-655-6303**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT TO  
2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 185642

1. Corporation Name

STOFIN CO., INC.

80065355

- CONTINUED

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AS/Real Estate Counsel Ross, Daniel D., Esq. One North Clematis St., Suite 200 West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Ryan, Allan A., IV One North Clematis St., Suite 200 West Palm Beach, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/AS/Litigation Counsel Tarr, William F., Esq. One North Clematis St., Suite 200 West Palm Beach, FL 33401