2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Mar 13, 2001 8:00 am **DOCUMENT # 455592** Secretary of State 1. Entity Name S & R FASTENER CO., INC. 03-13-2001 90315 047 ***150.00 Principal Place of Business Mailing Address PO BOX 17208 6330 118TH AVE N. **CLEARWATER FL 33762** P O BOX 60 LUU240V4 LARGO FL 33773 ils 2. Principal Place of Business 3. Mailing Address 6330 118th AVEN DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State 4. FE! Number 59-1531372 LARGO Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required *3377.*3 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BUSCH, STEVEN BUSCH, STEVEN R Street Address (P.O. Box Number is Not Acceptable) 6730 WISTERIA LOOP LAND O LAKES FL 34639 6330 118th AVE. N 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Delete TITLE Change ☐ Addition TITLE BUSCH, ROBERT NAME MAME STREET ADDRESS STREET ADDRESS 2223 PHILIPPINE DR. APT.31 CITY-ST-ZIP CiTY-ST-7IP **CLEARWATER FL 34623** Change ☐ Addition Delete TITLE TITLE BUSCH, STEVEN R. 6330 118th AVE.N. NAME NAME BUSCH, STEVEN STREET ADDRESS STREET ADDRESS 1494 HARBOR HILLS DR LARGO , FL 33773 CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33770 ☐ Addition Delete ST TITLE TITLE Busch, Patrícia A. 6330 118th ave N. Largo, FL 33773 BUSCH, PATRICIA A. NAME NAME STREET ADDRESS STREET ADDRESS 1494 HARBOR HILLS DR CITY-ST-ZIP CITY-ST-ZIP **LARGO FL 34640** ☐ Channe ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 eath; 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR