

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 26, 2001 8:00 am**
Secretary of State

03-26-2001 90076 002 ***150.00

DOCUMENT # 664031

1. Entity Name

HARRIS AND SCHROEDER BUILDERS, INC.

Principal Place of Business

**404 W MOWRY DR
HOMESTEAD FL 33030
US**

Mailing Address

**404 W MOWRY DR
HOMESTEAD FL 33030
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

59-1961366

Applied For

Not Applicable

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

**HARRIS, JAMES M
19425 SW 312 ST
HOMESTEAD FL 33030**

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	STD			<input type="checkbox"/> Delete		SD			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	HARRIS, NAKITA S.	19425 SW 312 ST	HOMESTEAD FL 33030			Harris, Nakita S.	19425 SW 312 St.	Homestead, FL 33030	
	PD			<input type="checkbox"/> Delete		VD			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	HARRIS, JAMES M	19425 SW 312TH ST	HOMESTEAD FL 33030			Borowicz, Gary	833 NW 9 St.	Homestead, FL 33030	
				<input type="checkbox"/> Delete		TD			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
						Padgett, John	23505 SW 202 Ave.	Homestead, FL 33031	
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

James M. Harris

James M. Harris

March 20, 2001

305-247-6156

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)