2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 24, 2002 8:00 am DOCUMENT # G38100 Secretary of State 1. Entity Name 03-24-2002 90075 044 ***150.00 ANDO BUILDING CORPORATION Principal Place of Business Mailing Address POST OFFICE BOX 4336 POST OFFICE BOX 4336 RUU47506 VERO BEACH FL 32964 VERO BEACH FL 32964 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2303154 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DORAWA, ANDRE Street Address (P.O. Box Number is Not Acceptable) 274 HARP TERRACE SEBASTIAN FL 32958 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 (NOTE: Registered Agent signature required when reinstating) 🤾 Signature, typed or printed name of registered agent and title if applicable. 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE VILEPPES CR2E034 (9/01) TITLE ☐ Delete HERSHBERGER NAME DORAWA, ANDRE NAME JEREMY STREET ADDRESS 649 CAVERN TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEBASTIAN FL 32958 ☐ Delete TITLE ☐ Change I.AME NAME DORAWA, JERZY STREET ADDRESS STREET ADDRESS 1311 WHITMORE ST CITY-ST-ZIP CITY-ST-ZIP SEBASTIAN FL 32958 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY_81-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 uport 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 lee empowered dexecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or trus changed, or on an attachment with SIGNATURE: