

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90503 021 ***150.00

DOCUMENT # P02000084252	
1. Entity Name The Stepenberg Company	

DO NOT WRITE IN THIS SPACE

70045130

2. Principal Place of Business 5606 B Via Delray Suite, Apt. #, etc.	3. Mailing Address 5606 B Via Delray Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Delray Beach, FL	City & State Delray Beach, FL	4. FEI Number 22-3871824	Applied For Not Applicable
Zip 33484	Country U.S.A.	Zip 33484	Country U.S.A.
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Daniel G. J. Stepenberg
Street Address (P.O. Box Number is Not Acceptable) 5606 B Via Delray
City Delray Beach
FL
Zip Code 33484

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

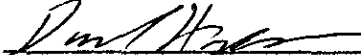
9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/V/T/S Daniel G. J. Stepenberg 5606 B Via Delray Delray Beach, FL 33484	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Daniel G. J. Stepenberg 3/31/03 561 4966054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E0345 (12/02)