

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 08, 2001 8:00 am**  
**Secretary of State**  
 03-08-2001 90123 043 \*\*\*150.00

**DOCUMENT # P00000059595**

1. Entity Name  
**CONTINENTAL PAINTING, WATERPROOFING & RESTORATION, Inc**

Principal Place of Business  
**2950 N 28TH TERR  
 HOLLYWOOD FL 33020**

Mailing Address  
**2950 N 28TH TERR  
 HOLLYWOOD FL 33020**

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

**65-1019875**

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

**CT CORPORATION SYSTEM  
 1200 S PINE ISLAND RD  
 PLANTATION FL 33324**

Name **Richard E. Schatz Esquire**

Street Address (P.O. Box Number is Not Acceptable)  
**Stearns, Weaver, Miller & Co**

**150 West Flagler Street, Suite 2200**

City **Miami**

FL

Zip Code **33130**

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 **Richard E. Schatz**

(NOTE: Registered Agent signature required when reinstating)

**3/2/01**

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 ☐ Delete  
 NAME **D**  
 STREET ADDRESS **PATTERSON, D. SCOTT**  
 CITY-ST-ZIP **FIRST SERVICE BLDG, 1140 BAY ST, STE 4000**  
**TOTONTO, ONT M5S 2B4**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME **D**  
 STREET ADDRESS **STRUNIN, RICHARD**  
 CITY-ST-ZIP **2950 N 28TH TERR**  
**HOLLYWOOD FL 33020**

TITLE ☒ Change ☐ Addition  
 NAME **DPS**  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME **D**  
 STREET ADDRESS **GOMBERG, GENE**  
 CITY-ST-ZIP **2950 N 28TH TERR**  
**HOLLYWOOD FL 33020**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
 NAME **Steven J. Christensen**  
 STREET ADDRESS **2950 N. 28th Terrace**  
 CITY-ST-ZIP **Hollywood, Fla 33020**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/10/01**

**(954) 925-8200**  
**X2288**

CR2E034 (10/00)