

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90020 035 ***158.75

0612715 AT

DOCUMENT # 494625

1. Entity Name
CUHILL, INC.

Principal Place of Business

**HWY 64 E
P.O. BOX 841
COOPER HILL TN 37317
US**

Mailing Address

**16872 ROYAL CREST
HOUSTON TX 77058
US**



2. Principal Place of Business

3. Mailing Address

P.O. Box 279

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bellevue, WA

4. FEI Number

59-1687960

Applied For

Not Applicable

Zip

Country

Zip

Country

98009-0279

USA

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

**ENSIO, MARK
531 BAY DR
VERO BEACH FL 32963**

Name

Street Address (P.O. Box Number is Not Acceptable)

5065 Aunt Joseph Island Lane

City

Vero Beach

FL

Zip Code

32967

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, 2002 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	P	<input type="checkbox"/> Delete
NAME	ENSIO, MARK A	
STREET ADDRESS	16872 ROYAL CREST	
CITY - ST - ZIP	HOUSTON TX 77058	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ENSIO, PAAVO	
STREET ADDRESS	16872 ROYAL CREST	
CITY - ST - ZIP	HOUSTON TX 77058	
TITLE	D	<input type="checkbox"/> Delete
NAME	ENSIO, MARK	
STREET ADDRESS	531 BAY DRIVE	
CITY - ST - ZIP	VERO BEACH FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	WILSON, MIKE	
STREET ADDRESS	3027 MARINA BAY DR FM 2094	
CITY - ST - ZIP	LEAGUE CITY TX 22573	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

MARK A ENSIO, PRESIDENT 2/15/2002 455-2552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)