

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90032 016 ***150.00

0230062

DOCUMENT # 660615

1. Entity Name

SAMBOL CONSTRUCTION CORPORATION OF FLORIDA

Principal Place of Business

**13290 DEAUVILLE DR
 PALM BEACH GARDENS FL 33410
 US**

Mailing Address

**13290 DEAUVILLE DRIVE
 PALM BEACH GARDESN FL 33410
 US**

717885



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3181 MONET DR.

Suite, Apt. #, etc.

3. Mailing Address

3181 MONET DR.

Suite, Apt. #, etc.

City & State

PALM BEACH GARDENS, FL

City & State

PALM BEACH GARDENS, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33410

Country

US

Zip

33410

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SAMBOL, RICHARD
 13290 DEAUVILLE DR
 PALM BEACH GARDENS FL 33410**

7. Name and Address of New Registered Agent

Name

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

3181 MONET DR.

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

TITLE **PD** ☐ Delete
 NAME **SAMBOL, RICHARD**
 STREET ADDRESS **13290 DEAUVILLE DR**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **ST** ☐ Delete
 NAME **SAMBOL, JANICE**
 STREET ADDRESS **13290 DEAUVILLE DR**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **3181 MONET DR.**
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **3181 MONET DR.**
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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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:

Richard Sambol
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD SAMBOL

2/12/01

561-626-7954

Date

Daytime Phone #

CR2034 (10/00)