

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 693628

1. Entity Name

STEVEN M. SOROKA SALES COMPANY, INC.

**FILED**  
Jan 09, 2002 8:00 am  
Secretary of State

01-09-2002 90019 050 \*\*\*150.00

UN358/0 AV

Principal Place of Business

4100 W KENNEDY BLVD  
SUITE 230  
TAMPA FL 33609

Mailing Address

PO BOX 320465  
TAMPA FL 33679

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

59-2105861

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SOROKA, STEVEN M  
4302 W. HENDERSON BLVD STE #110  
TAMPA FL 33629

7. Name and Address of New Registered Agent

Name Steven M. Soroka  
Street Address (P.O. Box Number is Not Acceptable)  
1028 Royal Palm Rd.  
City Tampa FL Zip Code 33602

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

TITLE DP ☐ Delete  
NAME SOROKA, STEVEN PASS  
STREET ADDRESS 1028 ROYAL PALM RD  
CITY-ST-ZIP TAMPA FL 33602

TITLE DV ☐ Delete  
NAME SOROKA, SUSAN PASS  
STREET ADDRESS 1028 ROYAL PALM RD  
CITY-ST-ZIP TAMPA FL 33602

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 Soroka Steven  
STREET ADDRESS 1028 Royal Palm Rd.  
CITY-ST-ZIP Tampa Fl. 33602

TITLE ☐ Change ☐ Addition  
NAME SOROKA SUSAN  
STREET ADDRESS 1028 Royal Palm Rd.  
CITY-ST-ZIP Tampa Fl. 33602

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

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

TITLE ☐ Change ☐ Addition  
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 form 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 reports 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 REQUIRED**

1-4-02

813-634-0139

CR2E034 (9/01)