

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90036 048 ***150.00

DOCUMENT # F40261

1. Entity Name
SAHTEIN, INC.

Principal Place of Business
99696 OVERSEAS HWY #2
KEY LARGO FL 33037

Mailing Address
102250 OVERSEAS HWY
KEY LARGO FL 33037

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 **59-2093880**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LUPINO, JAMES S
90130 OLD HIGHWAY
TAVERNIER FL 33070

7. Name and Address of New Registered Agent

Name

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

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, 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	PD	<input type="checkbox"/> Delete
NAME	GANIM, LEE G	
STREET ADDRESS	102250 OVERSEAS HWY	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	DST	<input checked="" type="checkbox"/> Delete
NAME	GANIM, ROSEANN	
STREET ADDRESS	102250 OVERSEAS HWY	
CITY-ST-ZIP	KEY LARGO FL 33037	
TITLE	D	<input type="checkbox"/> Delete
NAME	GANIM, GREGORY D	
STREET ADDRESS	102250 OVERSEAS HWY	
CITY-ST-ZIP	KEY LARGO FL 33037	
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"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Gregory D. Ganim	
STREET ADDRESS	102250 Overseas Hwy.	
CITY-ST-ZIP	Key Largo FL 33037	
TITLE	DST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Laura A. Ganim	
STREET ADDRESS	102250 Overseas Hwy.	
CITY-ST-ZIP	Key Largo FL 33037	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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:

Gregory D. Ganim
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)