

2001 UNIFORM BUSINESS-REPORT (UBR)

DOCUMENT # F51323

1. Entity Name

SUPERIOR PAPERHANGING BY STEVE AUERBACH, INC.

Principal Place of Business

NC.
21120 NE 18TH COURT
N MIAMI BEACH FL 33179

Mailing Address

NC.
21120 NE 18TH COURT
N MIAMI BEACH FL 33179

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2132034

Applied For

Not Applicable

Zip

Country

Zip

Country

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

AUERBACH, STEVE
21120 NE 18TH COURT
N. MIAMI FL

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, 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 P ☐ Delete
NAME AUERBACH, STEVE
STREET ADDRESS 21120 NE 18TH COURT
CITY-ST-ZIP N MIAMI BCH, FL 33179

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

TITLE S ☐ Delete
NAME CLARK, LARRY
STREET ADDRESS 13845 N.E. 11 AVÉ.
CITY-ST-ZIP N. MIAMI FL 33161

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

TITLE VP ☐ Delete
NAME KKOSHUTA, RONALD
STREET ADDRESS 16422 N.W. 27 PL.
CITY-ST-ZIP N M B FL 33160

TITLE ☒ Change ☐ Addition
NAME UP KASHUTA, RONALD
STREET ADDRESS 16422 N.E. 27 PL.
CITY-ST-ZIP N M B FL. 33160

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

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:

STEVE AUERBACH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/01
Date

305/932-3480
Daytime Phone #

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90072 010 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)