

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002868

1. Entity Name

WEISNER STEEL PRODUCTS, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90009 010 ***150.00

Principal Place of Business

Mailing Address

77 MORAGA WAY
ORINDA CA 94563

77 MORAGA WAY
ORINDA CA 94563-3019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-1723717

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

WILSON, HAROLD R JR.
23429 SHINING STAR DRIVE
207 NO. 12TH ST.
LAND O'LAKES FL 34639

Name

Same

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

3997 ROSWELL

City

LAND O'LAKES

FL

Zip Code

34639

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

N/A

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, 2000 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 CP ☐ Delete
NAME SILVER, IVOR
STREET ADDRESS 77 MORAGA WAY
CITY-ST-ZIP ORINDA CA 94563

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

TITLE D ☐ Delete
NAME KASAMARSV, K
STREET ADDRESS ONE CALIFORNIA ST
CITY-ST-ZIP SAN FRANCISCO CA 94111

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

TITLE CV ☐ Delete
NAME SOTO, H.
STREET ADDRESS ONE CALIFORNIA ST.
CITY-ST-ZIP SAN FRANCISCO CA 94111

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

TITLE D ☐ Delete
NAME PAUL, KABASHIMA
STREET ADDRESS ONE CALIFORNIA STREET
CITY-ST-ZIP SAN FRANCISCO CA

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

TITLE T ☐ Delete
NAME SILVER, B.
STREET ADDRESS ONE SOUTHAMPTON PL.
CITY-ST-ZIP LAFAYETTE CA 94596

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

TITLE DS ☐ Delete
NAME SILVER, MARK
STREET ADDRESS 77 MORAGA WAY
CITY-ST-ZIP ORINDA CA 94563

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK SILVER

04/26/00

Date

925-254-6800

Daytime Phone #

CR2E034 (9/99)