

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State
 04-29-2002 90037 012 ***150.00

DOCUMENT # F98000001534

1. Entity Name
SUNBELT BUILDING SYSTEMS, INC.

Principal Place of Business
2571 STATE RD 60 WEST
BARTOW FL 33830

Mailing Address
12243 BRANFORD STREET
SUN VALLEY CA 91352

2. Principal Place of Business
12243 Branford Street
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Sun Valley Ca

City & State

4. FEI Number
95-4673732

Applied For
 Not Applicable

Zip
91352

Country
LA

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D
SCHER, ROBERT
55 LA FRANCE AVENUE
BLOOMFIELD NJ

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VSTD
JOHNSON, LORI M
12243 BRANFORD STREET
SUN VALLEY CA

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D.
CHEONG, T-C
12243 BRANFORD STREET
SUN VALLEY CA

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

AT
GAMBOA, PETER
12243 BRANFORD ST
SUN VALLEY CA 91352

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

818-896-1101

Date

Daytime Phone #

0615178 AL

CR2E034 (9/01)