

FILED
Jun 24, 2003 8:00 am
Secretary of State

06-24-2003 90011 038 ***158.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # J09270 1. Entity Name O & E SPECIALTIES, INC.					
Principal Place of Business 140 143 WHITAKER RD SUITE B LUTZ, FL 33549 US		Mailing Address 17520 MEADOWBRIDGE DR LUTZ, FL 33549			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-2699206 Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent LOPEZ, SANDRA A 17520 MEADOWBRIDGE DR LUTZ, FL 33549			
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. I am familiar with, and accept the obligations of, registered agent. SIGNATURE: <u>Sandra A. Lopez</u> DATE: <u>6-20-03</u> <small>(Signature, typed or printed name of registered agent and date 2 applicable. (NOTE: Registered Agent's signature required when resigning).)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution... <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOPEZ, FRANK E 17520 MEADOWBRIDGE DR LUTZ, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CR2E-034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, SANDRA 17520 MEADOWBRIDGE DR. LUTZ, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Sandra A. Lopez</u> Sandra A. Lopez (913) <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Vice President 948-1354 Date: <u>6-20-03</u> <small>Signature Phone #</small>					

90140211



☒ CHECK HERE IF MAKING CHANGES

Attachment

O & E Specialties, Inc.

140 Whitaker Rd., Lutz, Florida 33549

Phone (813) 948-1354

Fax (813) 948-1355

90140211
509270

June 20, 2003

Florida Department of State
UBR Report – Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

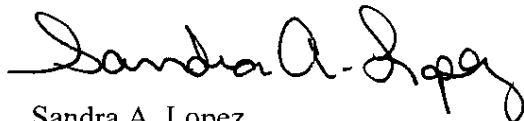
To Whom It May Concern:

We did not receive any information or packet regarding this years UBR Report. I have just become aware that we were to get the information from the internet and that is why our report was not submitted sooner.

I am sending the required \$150.00 and asking the late fee be waived, due to the fact that I did not receive sufficient notification about the internet and did not get the usual packet in the mail.

Thank you for your understanding.

Sincerely,



Sandra A. Lopez
Vice President