

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90308 028 \*\*\*150.00

DOCUMENT # J35623

1. Entity Name

UNITED STATES BRONZE SIGN COMPANY OF FLORIDA, IN

Principal Place of Business

Mailing Address

1065 E 28TH ST  
HIALEAH FL 33013-3721  
US

811 SECOND AVENUE  
NEW HYDE PARK NY 11040

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 58-1700104

Applied For

Not Applicable

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

BERGER, WILLIAM  
1630 N. FEDERAL HWY.  
FT. LAUDERDALE FL 33305

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 KASTEN, ALAN  
STREET ADDRESS 90-60 UNION TPPE  
CITY-ST-ZIP GLENDALE, NY.

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

TITLE VP ☐ Delete  
NAME BARBEOSCH, GEORGE  
STREET ADDRESS 71-34 CENTRAL AVE.  
CITY-ST-ZIP GLENDALE, NY.

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  
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STREET ADDRESS  
CITY-ST-ZIP

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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:

*George T. Barbeosch* GEORGE T. BARBEOSCH

Date

3/14/01

Daytime Phone #

516 352-5155

CR2E034 (10/00)