## 2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** J73703 1. Entity Name STEEL BUILDINGS, INC. Principal Place of Business Mailing Address 2454 CENTERVILLE RD P.O. BOX 13405 SUITE C TALLAHASSEE FL 32317 TALLAHASSEE FL 32308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country 6. Name and Address of Current Registered Agent Name LESLIE, GREGORY C

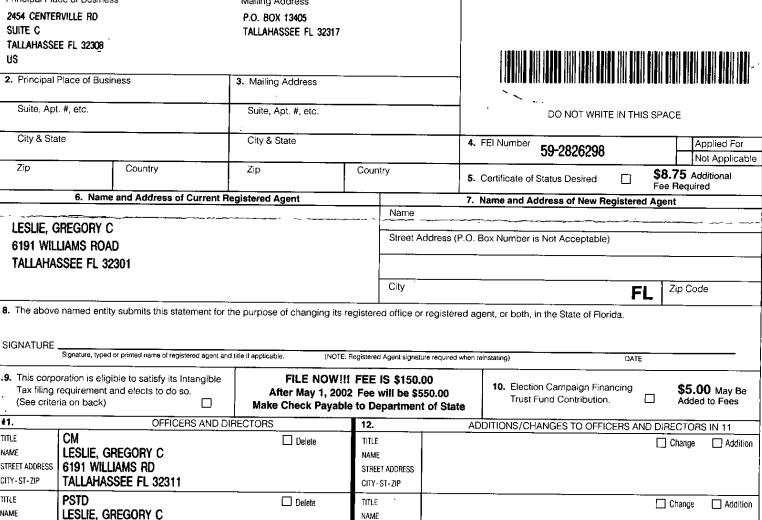
Signature, typed or printed name of registered agent and title if applicable.

.9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

## **FILED** Jun 25, 2002 8:00 am Secretary of State

06-25-2002 90437 026 \*\*\*550.00



Ψ1.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CM LESLIE, GREGORY C 6191 WILLIAMS RD TALLAHASSEE FL 32311	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		noitibb
NAME STREET ADDRESS CITY-ST-ZIP	PSTD LESLIE, GREGORY C 6191 WILLIAMS ROAD TALLAHASSEE FL 32311	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Ad	ddition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE -NAME	☐ Change ☐ Ad	ddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	ddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	dition

City

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

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 in proposed 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 ad

SIGNATURE:

6191 WILLIAMS ROAD TALLAHASSEE FL 32301

(See criteria on back)

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR