

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0048641 AV

DOCUMENT # J73703

1. Entity Name
STEEL BUILDINGS, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 28 PM 1:12

Principal Place of Business
2454 CENTERVILLE RD
SUITE C
TALLAHASSEE FL 32308
US

Mailing Address
P.O. BOX 13405
TALLAHASSEE FL 32317



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 59-2826298

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

LESLIE, GREGORY C
6191 WILLIAMS ROAD
TALLAHASSEE FL 32301

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CM
NAME LESLIE, GREGORY C
STREET ADDRESS 6191 WILLIAMS RD
CITY-ST-ZIP TALLAHASSEE FL 32311

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PSTD
NAME LESLIE, GREGORY C
STREET ADDRESS 6191 WILLIAMS ROAD
CITY-ST-ZIP TALLAHASSEE FL 32311

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CITY-ST-ZIP

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:

SIGNATURE OF GREGORY C. LESLIE

5/22/03

(850) 422-0099

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)