

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

**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90387 001 \*\*\*600.00

**DOCUMENT # K16226**

**1. Entity Name**  
**FINE LINE CONSTRUCTION & ELECTRIC, INC.**



**Principal Place of Business**  
**210 LOCK RD**  
**DEERFIELD BEACH FL 33429**  
**US**

**Mailing Address**  
**P.O. BOX 1452**  
**BOCA RATON FL 33429**



**2. Principal Place of Business**

**3071 N. DIXIE HWY**

**3. Mailing Address**

**PO BOX 1452**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

**City & State**  
**POMPANO BEACH FL**

**City & State**  
**BOCA RATON, FL**

**4. FEI Number** **65-0033228**

**Applied For**  
**Not Applicable**

**Zip**  
**33064**

**Country**  
**USA**

**Zip**  
**33429**

**Country**  
**USA**

**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**

**HUMMEL, JOSEPH D**  
**3841 NE 24TH AVE**  
**LIGHTHOUSE POINT FL 33064**

**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**

**Joseph Hummel, President**

**4/1/03**

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

(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** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **P** ☐ Delete  
**NAME** **HUMMEL, JOSEPH**  
**STREET ADDRESS** **PO BOX 1452**  
**CITY-ST-ZIP** **BOCA RATON FL 33425**

**TITLE** ☐ Change ☐ Addition  
**NAME** **JOSEPH HUMMEL**  
**STREET ADDRESS** **PO BOX 1452**  
**CITY-ST-ZIP** **BOCA RATON, FL 33429**

**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**

**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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/1/03 561-989-0911**

Date

Daytime Phone #

CR2E034 (10/02)