

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90204 033 ***150.00

DOCUMENT # K52995

1. Entity Name

BECKER ALUMINUM & CONSTRUCTION, INC.

Principal Place of Business

6805 US HWY 301 S.
P.O. BOX 1545
RIVERVIEW FL 33569-5138
US

Mailing Address

6805 US HWY 301 S.
P.O. BOX 1545
RIVERVIEW FL 33569
US

2. Principal Place of Business

2035 DOHLE RD.

3. Mailing Address

Suite, Apt. #, etc.
P.O. Box 1545

City & State

SEFFNER, FL

City & State

RIVERVIEW FL

Zip

33584

Country

US

Zip

33568

Country

US

4. FEI Number

59-2925638

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BECKER, MYRON
9911 SPRINGWAY DR
RIVERVIEW FL 33569

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.

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE	DV	☐ Delete
NAME	BECKER, MICHAEL	
STREET ADDRESS	2035 DOHLE ROAD	
CITY-ST-ZIP	SEFFNER FL	
TITLE	DP	☐ Delete
NAME	BECKER, MYRON	
STREET ADDRESS	9911 SPRINGWAY DR	
CITY-ST-ZIP	RIVERVIEW FL	
TITLE	DS	☐ Delete
NAME	BECKER, MARILYN	
STREET ADDRESS	9911 SPRINGWAY DR	
CITY-ST-ZIP	RIVERVIEW FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

W. Becker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 31, 2001

813-671-2303

Daytime Phone #

CR2E034 (5/01)

A0085417

Attachment Doc # K52995

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Please find our filing paper along with our check for \$150.00. Am requesting the opportunity to pay as we've done in all our years.

We didn't receive the first filing report I'm not sure why; but, we closed our office at the street address and our post office changed the zip code for P.O. Boxes. In all our post office here has done a number on us with all correspondence.

Please accept our apology. In our twenty years haven't been late, I'm sure you can see that in our records.

Thanks,
Marilyn Becker

K52995
Becker Alum. Cons.