## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 05, 2001 8:00 am **DOCUMENT # L06617 Secretary of State** 1. Entity Name VEREB CARPENTRY, INC. 02-05-2001 90129 003 \*\*\*150.00 Principal Place of Business Mailing Address % ALAN M VEREB % ALAN M VEREB 19540 GOTTARDE ROAD 19540 GOTTARDE ROAD NORTH FORT MYERS FL 33917 NORTH FORT MYERS FL 33917 3. Mailing Address 4348 MARINER RD Suite, Apt. #, etc. 2. Principal Place of Business DO NOT WRITE IN THIS SPACE City & State City & State 65-0136318 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VEREB. ALAN M 19540 GOTTARDE ROAD NORTH FORT MYERS FL 33917 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change Addition Delete TITLE TITLE UEREB ALAN M VEREB, ALAN M NAME NAME 4348 MARINER RP 19540 GOTTARDE RD STREET ADDRESS STREET ADDRESS BONITA SPRINGS FL 34/34 NORTH FORT MYERS FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS

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: 

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