

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

**FILED**  
**May 08, 2002 8:00 am**  
**Secretary of State**

05-08-2002 90138 009 \*\*\*150.00

**DOCUMENT #** L39350

2640-4

**1. Entity Name**

SARASOTA OFFICE AND WAREHOUSE, INC.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

1991 Main Street

**3. Mailing Address**

1991 Main Street

Suite, Apt. #, etc.

Suite 183

Suite, Apt. #, etc.

Suite 183

City & State

Sarasota, Florida

City & State

Sarasota, Florida

Zip

34236

Country

USA

Zip

34236

Country

USA

**4. FEI Number**

65-0161002

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75** Additional  
Fee Required

**7. Name and Address of Current Registered Agent**

Name

Band, Steve

Street Address (P.O. Box Number is Not Acceptable)

1991 Main Street - Suite 183

City

Sarasota

FL

Zip Code  
34236

**DO NOT WRITE  
IN THIS SPACE**

**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) ☐

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DPS	Karol, Herbert J.	222 Beach Road	Sarasota, FL 34242				
D	Band, Steve	1991 Main Street - Suite 183	Sarasota, FL 34236				

**DO NOT WRITE  
IN THIS SPACE**

**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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steve Band, Director

4/25/02

(941) 366-6660

Date

Daytime Phone #

CR2E034B (12/01)