

2000 UNIFORM BUSINESS REPORT (UBR)

8/1

DOCUMENT # L44085

1. Entity Name

R. HUBER CONSTRUCTION CO.

FILED
Sep 14, 2000 8:00 am
Secretary of State

08-29-2000 90031 013 ***150.00

Principal Place of Business

Mailing Address

7206 EAST TROPICAL WAY
 PLANTATION, FL 33317

SAME

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

65-0170316

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROBERT G. HUBER
 7206 EAST TROPICAL WAY
 PLANTATION, FL 33317

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

Robert G. Huber

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9-11-00

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 \$150.00
AFTER MAY 1-2000 Fee will be \$550.00
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: DIRECTOR ☐ Delete
 NAME: ROBERT G. HUBER
 STREET ADDRESS: SAME
 CITY-ST-ZIP:

TITLE: PRESIDENT ☐ Delete
 NAME: ROBERT G. HUBER
 STREET ADDRESS: SAME
 CITY-ST-ZIP:

TITLE: SECRETARY-TREASURER ☐ Delete
 NAME: DORIS M. HUBER
 STREET ADDRESS: SAME
 CITY-ST-ZIP:

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
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 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:

Doris M. Huber

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-22-00

Date

954-792-6727

Daytime Phone #

CR2E034 (9/99)

R. HUBER CONSTRUCTION CO.
7206 EAST TROPICAL WAY
PLANTATION, FL 33317

PB292
attachment Doc.
L44085
[REDACTED]
309834

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Document #L44085

Form was not received from the State due to change of address shown above.

Check No. 1327 enclosed to cover cost. We would like to have the penalty revoked if possible.

Thank you.

Sincerely,

Robert G. Huber

Robert G. Huber

RGH/dmh