## 2000 UNIFORM BUSINESS REPORT (UBR) Jan 19, 2000 8:00 am **DOCUMENT # L50517** 1. Entity Name **Secretary of State** SOZIO CONSTRUCTION CO. 01-19-2000 90169 039 \*\*\*150.00 Principal Place of Business Mailing Address 909 SE 47TH TERRACE #105 909 SE 47TH TERRACE #105 CAPE CORAL FL 33904-9000 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0206821 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SOZIO, ANTHONY S Street Address (P.O. Box Number is Not Acceptable) 1201 SW 54TH LANE CAPE CORAL FL 33914 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. F. F. Mar Directors AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change ☐ Delete TITLE TITLE SOZIO, ANTHONY S NAME NAME STREET ADDRESS 1201 SW 54TH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 Change Addition ☐ Delete TITLE SOZIO, SYLVESTER NAME NAME STREET ADDRESS STREET ADDRESS 159 PINE ISLAND RD. CITY: ST-7IP-CITY-ST-ZIP ~ CAPE CORAL FL-33909 Same ■ Addition Delete TITLE TITLE NAME sam p SOZIO, ANTHONY S III NAME STREET ADDRESS STREET ADDRESS 513 SE 23RD PLACE CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33990 TITLE Delete SOZIO, NICHOLAS A NAME NAME STREET ADDRESS STREET ADDRESS 225 SW 33RD TERR CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Addition SWE ☐ Delete TITLE TITLE NAME SOZIO, SCOTT M NAME NE 11. Street STREET ADDRESS STREET ADDRESS 1331 SE 6TH ST CITY-ST-ZIP CITY-ST-7IP CAPE CORA FL 33990 Delete Addition Change TITLE TITLE Michael R NAME NAME STREET ADDRESS STREET ADDRESS

changed, or on an attachment with an attress; with all other like empowered.

SIGNATURE: SIGNATURE: SIGNATURE:

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section M9.07(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

CITY-ST-ZIP

CITY-ST-ZIE