

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90054 044 ***150.00

DOCUMENT # M13342

1. Entity Name
J.H. STEIB YACHTS, INC.

Principal Place of Business
2000 ALANTIC SHORES BLVD.
#117
HALLANDALE FL 33009
US

Mailing Address
2000 ALANTIC SHORES BLVD.
#117
HALLANDALE FL 33009
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6307-1 BAY CLUB DR

Suite, Apt. #, etc.
#1

City & State
FT. LAUDERDALE, FLA

Zip
33308

Country
USA

3. Mailing Address
6307-1 BAY CLUB DR

Suite, Apt. #, etc.
#1

City & State
FT. LAUDERDALE, FLA

Zip
33308

Country
USA

4. FEI Number **59-2524669**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

STEIB, JOE
2000 ALANTIC SHORES BLVD.
#117
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

Name **JOE STEIB**
Street Address (P.O. Box Number is Not Acceptable)
6307-1 BAY CLUB DR
City **FT. LAUDERDALE** **FL** **Zip Code** **33308**

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

3-8-2002

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE PD	<input type="checkbox"/> Delete
NAME STEIB, JOSEPH A.	
STREET ADDRESS 2000 ALANTIC SHORES BLVD., #117	
CITY-ST-ZIP HALLANDALE FL 33009	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME STEIB JOSEPH H.	
STREET ADDRESS 6307-1 BAY CLUB DR	
CITY-ST-ZIP FT. LAUD FLA 33308	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 19.07(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: JOE STEIB
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-2002 954-7724076
 Date Daytime Phone #

CR2E034 (9/01)