## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 29, 2001 8:00 am Secretary of State DOCUMENT # P0000013503 1. Entity Name, STEEL BUILDING DEPOT. INC. 01-29-2001 90170 031 \*\*\*150.00 Principal Place of Business Mailing Address 3500 PARK CENTRAL BLVD., N. 3500 PARK CENTRAL BLVD., N. POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KAYE & ROGER, P.A. Street Address (P.O. Box Number is Not Acceptable) C/O ROBERT KAYE 6261 NW 6TH WAY SUITE 103 FORT LAUDERDALE FL 33309 Zip Code FL 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 After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, 12. ☐ Addition ☐ Delete TITLE TITLE LARATRO, KAREN NAME NAME STREET ADDRESS STREET ADDRESS 3500 PARK CENTRAL BLVD., N. CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33064 ☐ Addition Change ☐ Delete TITLE TITLE ALLEN, BARBARA NAME NAME STREET ADDRESS 3500 PARK CENTRAL BLVD., N. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP POMPANO BEACH FL 33064 ☐ Addition Change TITLE ☐ Delete TITLE HOGELAND, BETTY NAME NAME 3500 PARK CENTRAL BLVD., N. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33064 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITI F GOLDBERG, LEON NAME NAME 3500 PARK CENTRAL BLVD., N. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP POMPANO BEACH FL 33064 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 empow

Daytime Phone #