

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90067 045 ***150.00

DOCUMENT # P00000030970

1. Entity Name
C.D.S. BUILDING SPECIALTIES, INC.



Principal Place of Business
**5567 TAYLOR ROAD
SUITE 6
NAPLES FL 34109**

Mailing Address
**5567 TAYLOR ROAD
SUITE 6
NAPLES FL 34109**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0993880**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRI-WALTH CORP
3461 BONITA BAY BLVD
BONITA SPRINGS FL 34134**

Name **Complete Accounting SVCS**
Street Address (P.O. Box Number is Not Acceptable)
6017 Pine Ridge Road #263
City **Naples** FL Zip Code **34119**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **9-6-03**

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PTD**
STREET ADDRESS **PENSENTI, DONATO V**
CITY-ST-ZIP **5567 TAYLOR ROAD SUITE 6
NAPLES FL 34109**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **SVD**
STREET ADDRESS **PENSENTI, DONATA**
CITY-ST-ZIP **5567 TAYLOR ROAD SUITE 6
NAPLES FL 34109**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED **DONATO V. PENSENTI**

Date **9/5/03** (239) 598-3953
Daytime Phone #

CR2E034 (4/03)

Attachment



80146506
#P00000030970

TO: DIVISION OF CORPORATIONS

SEPTEMBER 5, 2003

RE: U.B.R. FILING

Dear Sir / Madam,

Enclosed please find my uniform business report filing form which I understand is late. I spoke to a customer representative in your office earlier today. The reason for our late filing is that we never received the original notice. Please accept our apology for the delay.

Sincerely,



Donato V. Pensenti