

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2003 8:00 am
Secretary of State

05-12-2003 90204 026 ***150.00

0666937 AB

DOCUMENT # P00000037683

1. Entity Name
C. AND H. ENTERPRISES, INC. OF SARASOTA



Principal Place of Business
4319 MAYGAG RD
SARASOTA FL 34233

Mailing Address
362 BROOKVIEW DR
BROWNSBURG IN 46112



2. Principal Place of Business

P.O. Box 21238

3. Mailing Address

P.O. Box 21238

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Bradenton FL

City & State

Bradenton, FL

Zip

34204

Country

USA

Zip

34204

Country

USA

4. FEI Number 65-0999303

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ISAAC, ROOSEVELT S SR
347 SOUTH ORANGE AVE
ARCADIA FL 34266

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

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
After May 1, 2003 Fee will be \$550.00
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

TITLE P
NAME GRABER, HAROLD H
STREET ADDRESS 362 BROOKVIEW DR
CITY-ST-ZIP BROWNSBURG IN 46112 ☐ Delete

TITLE ST
NAME GRABER, CAROL B
STREET ADDRESS 362 BROOKVIEW DR
CITY-ST-ZIP BROWNSBURG IN 46112 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 6348 Robin Cove
CITY-ST-ZIP Bradenton, FL 34202 ☐ Change ☐ Addition

TITLE
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STREET ADDRESS 6348 Robin Cove
CITY-ST-ZIP Bradenton, FL 34202 ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

Harold H. Graber 5/1/03 941-737-2117

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)