

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000037878

1. Entity Name

STEPHEN COX, INC.

Principal Place of Business

2848 NE 9 TERRACE  
WILTON MANORS FL 33334

Mailing Address

2848 NE 9 TERRACE  
WILTON MANORS FL 33334

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

BOLEY, LESLIE S  
11900 SE FEDERAL HWY #205  
HOBE SOUND FL 33455

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FEE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE : ☐ Delete  
NAME : Stephen Cox  
STREET ADDRESS : 2848 NE 9th Terr  
CITY-ST-ZIP : Wilton Manors, FL 33334

TITLE : ☐ Delete  
NAME : Owner  
STREET ADDRESS : Stephen Cox  
CITY-ST-ZIP : 2848 NE 9th Terr  
Wilton Manors, FL 33334

TITLE : ☐ Delete  
NAME :  
STREET ADDRESS :  
CITY-ST-ZIP :

TITLE : ☐ Delete  
NAME :  
STREET ADDRESS :  
CITY-ST-ZIP :

TITLE : ☐ Delete  
NAME :  
STREET ADDRESS :  
CITY-ST-ZIP :

TITLE : ☐ Delete  
NAME :  
STREET ADDRESS :  
CITY-ST-ZIP :

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE : ☐ Change ☐ Addition  
NAME :  
STREET ADDRESS :  
CITY-ST-ZIP :  
**400004743024--0**  
**-12/28/01--01074--010**  
**\*\*\*\*150.00 \*\*\*\*150.00**

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

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

TITLE : ☐ Change ☐ Addition  
NAME :  
STREET ADDRESS :  
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TITLE : ☐ Change ☐ 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 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 of which I am empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen Cox

APPROVED  
AND  
FILED

01 DEC -4 PM 4:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

FEI Number  
65-1017263

Applied For  
Not Applicable

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

0276197


CR2E034 (10/00)

12/01/2001

Dear Sir,

I am enclosing my UBR with a check for \$150.00. I am sorry fir the delay in filing this form. The delay was due to health issues that kept me from tending to my business affairs. Please forgive my tardiness and accept this check as payment. Thank You.

Regards,

  
Stephen Cox  
2848 NE 9<sup>th</sup> Terr  
Wilton Manors, FL 33334  
954.565.1856