## .2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000053369  1. Entity Name  F & J STEEL DETAILING, INC.					FILED 01 JAN 16 PM 3: 00			
Principal Plac	ce of Business	. Mailing Address			TALLAHASSEE, FLO			
513 NORTHEAS OMPANO BEAG	ST 31 ST.	1513 NORTHEAST 31 ST. POMPANO BEACH FL						
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State			FEI Number 65-1014049	<del>                                     </del>	lied For Applicable	
Zip	Country	Zip	Country		Certificate of Status Desired	\$8.75 Addit	ional	
	6. Name and Address of Current F	tegistered Agent	Name	7.	Name and Address of New Registered	Agent		
SPIEGEL & UTRERA, P.A.								
343 ALMERIA AVENUE CORAL GABLES FL 33134			Street A	Street Address (P.O. Box Number is Not Acceptable)				
0010	AL CABLEO I E GOTO		City	·····-	FI	Zip Code		
	named entity submits this statement for				FL	<u>-                                     </u>		
-	Signature, typed or printed name of registered agent at oration is eligible to satisfy its Intangible	FILE NOW!!!	Registered Agent signat	00	reinstating)  DATE  10. Election Campaign Financing	\$5.00	May Be	
Tax filing requirement and elects to do so. (See criteria on back)  After MAY 1, 2001  Make Check Payable			,	Trust Fund Contribution. Added to Feet				
11.	OFFICERS AND D		12.		ODITIONS/CHANGES TO OFFICERS AN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GHAZAWI, FIRAS B 615 SIESTA KEY CIRCLE DEERFIELD BEACH FL 33441	_ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Ghazai 1513 N Pompo	wi, firas B. E 31st Street and Beach, FL 331	<b>□</b> change ○ 64	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD GHAZAWI, BILLIE J 615 SIESTA KEY CIRCLE DEERFIELD BEACH FL 33441	T Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD Ghazai 1513 N	wi Billie J. E 31st Street no Beach, FL 33061	<b>⊡</b> - <del>Ch</del> ange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete_	TITLE NAME STREET ADDRESS CITY-ST-ZIP		900003576 -01/26/01 ****150.00	Change 529- 010550 ****15	Addition 114 0.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Change	Addition	
TITLE  AME  STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	☐ Addition	
indicated of the cor	on this report or supplemental report is:	true and accurate and that my wered to execute this report a	/ signature shall h	ave the same	119.07(3)(i), Florida Statutes. I further ce legal effect as if made under oath; that I ida Statutes; and that my name appears	am an officer o	r director	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: