

3/5/

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000071025**1. Entity Name
SOWE INC.**FILED**
Apr 16, 2001 8:00 am
Secretary of State

03-05-2001 90330 002 ***150.00

Principal Place of Business
14955 GULF BLVD.
MADEIRA BEACH FL 33708Mailing Address
14955 GULF BLVD.
MADEIRA BEACH FL 337082. Principal Place of Business
14955 GULF BLVD
Suite, Apt. #, etc.3. Mailing Address
SAME
Suite, Apt. #, etc.City & State
MADIERA BEACH, FL.
Zip
33708
Country
PINELLAS

City & State

4. FEI Number
WA 59 - 3662452Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****MICHAEL GUJU J**
LAW OFFICES OF MICHAEL J. GUJU, P.A.
24701 U.S. HWY. 19 NORTH, STE. 112
CLEARWATER FL 33763**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.

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) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees****11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PRESIDENT	JOHN H WEEST	7306 79TH ST N.	PINELLAS PARK, FL 33781	<input type="checkbox"/>
VICE PRESIDENT	MELVIN SOREM	8021 SAILBOAT KEY BLV.	S. PASADENA, FL 33707	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAR 1, 2001 **727-526-3529**
Date Daytime Phone #

CR2E034 (10/00)