

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000097853

1. Entity Name
REPUBLIC ALUMINIUM & STEEL, INC.

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90038 041 ***150.00

Principal Place of Business
6581 43RD ST NORTH #1503
PINELLAS PARK FL 33781

Mailing Address
6581 43RD ST NORTH #1503
PINELLAS PARK FL 33781

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
1020 11th ST North

City & State

City & State
ST PETERSBURG, FL

Zip

Country

Zip
33705-1116
Country
PINELLAS

4. FEI Number

59-3682464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OLMSTEAD, CHANA
1020 11TH ST NORTH
ST PETERSBURG FL 33705-1116

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

CHANA OLMSTEAD

(NOTE: Registered Agent signature required when reinstating)

4/6/01
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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME PD
STREET ADDRESS OLMSTEAD, RICHARD
CITY-ST-ZIP 1010 11TH ST NORTH
ST PETERSBURG FL 33705-1116 ☐ Delete

TITLE
NAME
STREET ADDRESS 1020 11th ST North
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME STD
STREET ADDRESS OLMSTEAD, CHANA
CITY-ST-ZIP 1010 11TH ST NORTH
ST PETERSBURG FL 33705-1116 ☐ Delete

TITLE
NAME
STREET ADDRESS 1020 11th ST North
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

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 Chana Olmstead CHANA OLMSTEAD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01 528-8836 (727)
Date Daytime Phone #

CR2E034 (10/00)