

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90065 015 ***150.00

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DOCUMENT # P00000098620

1. Entity Name

CUSTOM WOODWORKS, INC.

Principal Place of Business

6523 WATERFORD CIRCLE
 SARASOTA FL 34238

Mailing Address

5900 S. TAMiami TRAIL
 SUITE I
 SARASOTA FL 34231

2. Principal Place of Business

2309 OUTER DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota FL

City & State

4. FEI Number

65-1046680

Applied For

Not Applicable

Zip

34231

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ASTROLSKAS, CATHERINE L
 5900 S. TAMiami TRAIL
 SUITE I
 SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name CATHERINE L. ASTROLSKAS
 Street Address (P.O. Box Number is Not Acceptable)
 5900 S. TAMiami TRAIL
 SUITE I
 City SARASOTA, FL Zip Code 34231

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

Catherine L. Astrolskas

1-7-02

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, 2002 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 D
 NAME MARINO, ROBERT
 STREET ADDRESS 6523 WATERFORD CIRCLE
 CITY-ST-ZIP SARASOTA FL 34238 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
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 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DIP/SIT
 NAME ROBERT MARINO
 STREET ADDRESS 2309 OUTER DRIVE
 CITY-ST-ZIP SARASOTA, FL 34231 ☒ Change ☐ Addition

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

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

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

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

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:

Robert Marino
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02 (941) 780-7391
 Date Daytime Phone #

CFE034 (9/01)

902736



DO NOT WRITE IN THIS SPACE