2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

P01000006939 DOCUMENT #

1. Entity Name

Principal Place of Business

GENZ ENGINEERING, INC.



13938 CRANBERRY COURT 13938 CRANBERRY COURT WELLINGTON FL 33414 WELLINGTON FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-1114255 Not Applicable Zip Country Country \$8.75-Additional 5. Certificate of Status Desired 🐣 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GENZ, ERIK W Street Address (P.O. Box Number is Not Acceptable) 13938 CRANBERRY CT. **WELLINGTON FL 33414** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing **\$5.00** May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Addition ☐ Delete TITLE GENZ, W. ERIK NAME NAME 13938 CRANBERRY COURT STREET ADDRESS STREET ADDRESS WELLINGTON FL 33414 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

☐ Delete

8/10/03 56/-682-688/ Date Daytine Phone #

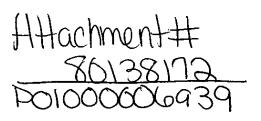
☐ Change

☐ Addition

FILED

08-13-2003 90075 029 ***150.00

Aug 13, 2003 8:00 am Secretary of State



August 10, 2003

Please find enclosed a check for \$150.00 for filing fee. I did not receive a notice that you say was mailed in January.

Thank you,

William Erik Genz