## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 16, 2002 8:00 am Secretary of State P01000078574 DOCUMENT # 1. Entity Name 04-16-2002 90049 022 \*\*\*150.00 ALL FLORIDA STEEL HOMES, INC. Principal Place of Business 701 HUMMINGBIRD LANE 701 HUMMUNZBIRD LANE じしたひしひ PLANTATION N. 33324 2. Principal Place of Business 3. Mailing Address 7525 S.W. 26 Court P.O. Box 290188 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Numbe Applied For Davie, Fl., 33329-0188 Davie, F1. Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33314 33329-0188 USA Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLEMAN, ANTHONY G JR Street Address (P.O. Box Number is Not Acceptable) 3275 W HILLSBORO BLVD #207 **DEERFIELD BEACH FL 33442** 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 3-15-02 CEB (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Addition CEO / Director NAME NAME Ralph Grandinetti STREET ADDRESS STREET ADDRESS 7525 S.W. 26 COURT DAVIE, FL. 33314 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition President/ Director NAME NAME Larry Frey STREET ADDRESS STREET ADDRESS 701 Hurmingbird Lane Plantation, Fl., 33324 CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME 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

13. I hereby certify that the information supplied with this filling 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

FILED