

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

REJECTED
05-21-2002 91145 027 ***150.00
P01000096592
FILED

02 SEP -5 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000096592**

1. Entity Name

CSG HOLDINGS EAST, INC

DO NOT WRITE IN THIS SPACE

9868 SANDALFOOT BLVD #205

Principal Place of Business

9868 Sandalfoot Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
BOCA RATON FL

City & State
BOCA RATON FL

4. FEI Number

☒ Applied For

☐ Not Applicable

33428 USA

33428 USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name **M. LUGO**

Street Address (P.O. Box Number is Not Acceptable)
9868 SANDALFOOT BLVD #205

City **BOCA RATON** FL **33428**

**DO NOT WRITE
IN THIS SPACE**

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

M. LUGO M. LUGO

4-29-02

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

(NOTE: Registered Agent signature required when resigning)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **M. LUGO**
NAME **9868 Sandalfoot Blvd**
STREET ADDRESS **9868 Sandalfoot Blvd #205**
CITY-ST-ZIP **BOCA RATON FL 33428**

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

M. LUGO M. LUGO

4-29-02 (561)305-2927

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

7/9/02