

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 2003

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91146 009 ***150.00

DOCUMENT # P01000098864

1. Entity Name WINSTON DIG-A-DITCH, Inc.

DO NOT WRITE IN THIS SPACE

90126892

2. Principal Place of Business
4341 SW 2nd Court

3. Mailing Address
4341 SW 2nd Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Plantation, Fl

City & State
Plantation, Fl.

4. FEI Number
65-1144666

Applied For
Not Applicable

Zip 33317 **Country** Broward

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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Bernard Schlossberg

Street Address (P.O. Box Number is Not Acceptable)
9900 W. Sample Rd. # 318

City Coral Springs **FL** **Zip Code** 33065

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

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)

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 NAME STREET ADDRESS CITY-ST-ZIP	D Rex A. Winston 4341 SW 2nd Ct Plantation, Fl. 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tina Winston 4341 SW 2nd Ct Plantations Fl. 33317	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/03
Date

954-797-7623
Daytime Phone #