

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90089 012 ***150.00

DOCUMENT # P01000112430

1. Entity Name
STEVEN UMANSKY, INC.

Principal Place of Business
3225 SOUTH MACDILL AVENUE
SUITE 129-278
TAMPA FL 33629

Mailing Address
3225 SOUTH MACDILL AVENUE
SUITE 129-278
TAMPA FL 33629



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For
☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UMANSKY, STEVEN C
3225 SOUTH MACDILL AVENUE
SUITE 129-278
TAMPA FL 33629

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **UMANSKY, STEVEN C**
 STREET ADDRESS **3225 SOUTH MACDILL AVENUE, SUITE 129-278**
 CITY-ST-ZIP **TAMPA FL 33629**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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)(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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/02 813 624-6270

CR2E034 (4/02)

attachment

3225 South Mac Dill Ave
Suite 129-278 Tampa, FL 33629
Phone: 813 624-6270

Steven Umansky Inc.

Memo

PO1000112430

To: To Whom It May Concern
From: Steven Umansky
Date: 9/12/2002
Re: Uniform Business Report and payment

Please find enclosed a \$150.00 payment for Steven Umansky, INC. annual fee and the Uniform Business Report.

This is the first and only copy received. Please feel free to contact me if you have any questions regarding payment and this form at 813 624-6270.

Thank you.

