

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

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90083 016 ***150.00

DOCUMENT # P02000036461



1. Entity Name
UNITED STEEL FACTORY INC.

Principal Place of Business
**C/O BUDNER 17682 SEALAKES DRIVE
BOCA RATON FL 33498**

Mailing Address
**C/O BUDNER 17682 SEALAKES DRIVE
BOCA RATON FL 33498**

2. Principal Place of Business
**2700 W. Cypress Creek Rd
Suite, Apt. #, etc. D-136**

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State
Ft. Lauderdale FL
Zip
33309
Country
USA

City & State
Zip
Country

4. FEI Number
03-0423444

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BUDNER, MORDECAI
17682 SEALAKES DRIVE
BOCA RATON FL 33498**

7. Name and Address of New Registered Agent

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 **Mordecai Budner**
Signature, typed or printed name of registered agent and title if applicable.

4/12/03
DATE

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
V	ZIMMERMAN, HOWARD	1383 SUSSEX DRIVE	N. LAUDERDALE FL 33068	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT	HOWARD ZIMMERMAN	3506 COCO LAKE DR.	COCONUT CREEK FL 33073	

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 this 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 title empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)