

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

03-05-2003 90034 012 ***150.00

DOCUMENT # P02000087485

1. Entity Name
S&H REFRESHMENT SERVICES, INC.



Principal Place of Business
**302-B NORTH ANGLERS DRIVE
MARATHON FL 33050**

Mailing Address
**96 PERRIN AVENUE
POMPTON LAKES NJ 07442**



2. Principal Place of Business
210 SCHOONER LANE

3. Mailing Address
P.O. Box 500213

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
DUCK KEY, FL

City & State
MARATHON, FL

4. FEI Number
51-0422746

Applied For
Not Applicable

Zip Country
33050 USA

Zip Country
33050 USA

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name **SHARON L. WAGNER, SECY**
Street Address (P.O. Box Number is Not Acceptable)
210 SCHOONER LANE
City **DUCK KEY** FL **33050**

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

Sharon L. Wagner

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/03

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 **PTD** ☐ Delete
NAME **WAGNER, HARRY J**
STREET ADDRESS **302-B NORTH ANGLERS DRIVE**
CITY-ST-ZIP **MARATHON FL 33050**

TITLE **VSD** ☐ Delete
NAME **WAGNER, SHARON L**
STREET ADDRESS **302-B NORTH ANGLERS DRIVE**
CITY-ST-ZIP **MARATHON FL 33050**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **210 SCHOONER LANE**
CITY-ST-ZIP **DUCK KEY, FL 33050**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **210 SCHOONER LANE**
CITY-ST-ZIP **DUCK KEY, FL 33050**

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

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

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

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

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 like empowered.

SIGNATURE:

Harry J. Wagner **SIGNATURE** **HARRY J. WAGNER**

2/25/03

305-289-7886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)