FILED

2002 Uniform Business Report (UBR)

changed, or on an attachment with an address, with all other like empowered

Apr 08, 2002 8:00 am Secretary of State DOCUMENT # P92000002816 1. Entity Name 04-08-2002 90240 025 ***150 00 C&B HOLUB, INC. Principal Place of Business Mailing Address 3634 COUNTRY CLUB BLVD 3634 COUNTRY CLUB BLVD SUNNY HILLS FL 32428 SUNNY HILLS FL 32428 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3152654 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent-7._Name and Address of New Registered Agent 🚐 😓 😓 HOLUB, CHARLES F Street Address (P.O. Box Number is Not Acceptable) 3634 COUNTRY CLUB BLVD SUNNY HILLS FL 32428 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (9/01) TITLE TITLE Addition ☐ Delete ☐ Change NAME HOLUB, CHARLES F NAME STREET ADDRESS STREET ADDRESS 3634 COUNTRY CLUB BLVD CITY-ST-ZIP SUNNY HILLS FL 32428 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE **VPT** NAME NAME HOLUB, BETTY A STREET ADDRESS STREET ADDRESS 3634 COUNTRY CLUB BLVD CITY-ST-ZIP SUNNY HILLS FL 32428 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE HOLUB, JENNIFER M NAME NAME STREET ADDRESS STREET ADDRESS 1774 SALEM DR CITY-ST-ZIP CITY-ST-ZIP SUNNY HILLS FL 32428 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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