

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P94000000958**1. Entity Name
WASKO FRAMING INC.**FILED**
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90030 018 ***150.00

Principal Place of Business

**360 JUNG BLVD
NAPLES F 34120
US**

Mailing Address

**360 JUNG BLVD
NAPLES F 34120
US**

2. Principal Place of Business

3561 3rd AVE SW

3. Mailing Address

3561 3rd AVE SW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

Zip

34117

Country

US

Zip

34117

Country

US4. FEI Number **65-0452707**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**WASKO, JEFFREY
360 JUNG BLVD
GOLDEN GOTE FL 33964**

7. Name and Address of New Registered Agent

Name

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

3561 3rd AVE SW

City

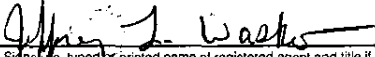
Naples**FL**

Zip Code

34117

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) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE **P** ☐ Delete
NAME **WASKO, JEFFREY**
STREET ADDRESS **360 JUNG BLVD**
CITY-ST-ZIP **NAPLES FL**TITLE **VP** ☐ Delete
NAME **VORTHERMS, JOHN**
STREET ADDRESS **256 14TH AVE. NW**
CITY-ST-ZIP **NAPLES FL**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3561 3rd Ave SW**
CITY-ST-ZIP **Naples, FL, 34117**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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

3/27/01

Date

Daytime Phone #

CR2E034 (10/00)

0542125