CHEFFY PASSIDOMO Fax:941-261-0884 Sep

FILED 09-25-2002 90124 036 ****61.25
SECRETARY OF STATE P95000013306
DIVISION OF CORPORATIONS

AMENDED UBR REPORT

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

02 SEP 30 PM 12:01

DOCUMENT # P95000013306

1. Entity Name

REITES CARPENTRY, INC.

873915

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3560 7th. AVE. S.W.	3560 7th. AVE.S.W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: NAPLES, FLORIDA	City & State: NAPLES, FLORIDA
Zip: 34117 Country: USA	Zip: 34117 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0558634 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Barry F. Reites, President

Street Address (P.O. Box Number is Not Acceptable): 3560 7th. Avenue S.W.

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: Barry F. Reites, President 9/23/02

(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) ☐

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

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Barry F. Reites, President 3560 7th. Ave. S.W. Naples, Florida 34117
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rhonda M. Reites, Secretary 3560 7th. Ave. S.W. Treas. Naples, Florida 34117
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Adam F. Reites, Vice Preside 2681 2nd. Ave. N.E. Naples, Florida 34120
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ADDing
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E084B (12/01)

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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Barry F. Reites 9/23/02 239-455-4787

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #