2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P95000073120 **DOCUMENT #**

1. Entity Name

TERSTEGGE SERVICES, INC.



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

04-14-2003 90402 037 ***150.00

			COD WE THE			
Principal Place of B	usiness	Mailing Address		7		
635 47 STREET WE		635 47 STREET WEST				
PALMETTO FL 3422	1	PALMETTO FL 34221				
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2. Principal Place of	of Business	3. Mailing Address			17 1660 17 1410 1 110 110 110	III GOII IGUI
Suite, Apt. #, etc	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.			10.00111000	
,				CHECK HERE IF MAKII	NG CHANGES	
City & State C		City & State		4. FEI Number of OFO0407	App	lied For
,		,		4. FEI Number 65-0589127		Applicable
Zip	Country	Zip	Country		\$8.75 Addit	ional
_I -	,			5. Certificate of Status Desired	Fee Required	
6.	Name and Address of Current	Registered Agent		7. Name and Address of New Registere	d Agent	
		<u> </u>	Name			
TERSTEGGE, JOHN M						
635 47 STREET WEST			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
			 -		*	
PALMETTO FL	34221					
			City		Zip Code	
				F	L 25 0000	
		r the purpose of changing its	registered office or regis	tered agent, or both, in the State of Florida. I a	n familiar with, ar	nd accept
the obligations o	f registered agent.					
	m was the					-
SIGNATURE	re, typed or printed name of registered agent a	and title if applicable. (NOTE	E: Registered Agent signature requi	ired when reinstating) DATE		
						
	OW!!! FEE IS \$150.00			9. Election Campaign Financing	\$5.00	May Be
	1, 2003 Fee will be \$550.00			Trust Fund Contribution.	☐ Added to	
Make Check Pava	able to Florida Department of					
	ibio to i lorida bepartinent o	State				
	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS I	
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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: