

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000039503

1. Entity Name

CONSTRUCTION SERVICES & SALES, INC.

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90224 037 ***150.00

Principal Place of Business

9271 PINE COVE DRIVE
ENGLEWOOD FL 34224
US

Mailing Address

9271 PINE COVE DRIVE
ENGLEWOOD FL 34224
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0718122

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASTRONSKAS, CATHERINE L
5900 S TAMiami TRAIL
SUITE #1
SARASOTA FL 34231

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HALLAMORE, CATHY J 9271 PINE COVE DRIVE ENGLEWOOD FL 34224	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

Date

Daytime Phone #

CR2E034 (10/00)

CATHERINE L. ASTRONSKAS, C.P.A., P.A.

Attachment

March 29, 2001

Construction Services & Sales, Inc.
9271 Pine Cove Drive
Englewood, FL 34224

823314
P96000039503

Attn: Cathy Keane

Re: 2001 Uniform Business Report (UBR)

Dear Cathy:

Enclosed please find a green and white form which used to be called The Florida Annual Report Form has been renamed to 2001 Uniform Business Report (UBR).

As you well know, **this form is to be signed, attach a check and mail before May 1, 2001.**

Make the check payable to **"Department of State" in the amount of \$150.00.**

After you sign, please make a copy of the form & your check for any future verification with the State if necessary.

Please remember that if you miss the deadline, the penalty is \$550.00 with no exceptions.

If you have any questions, please contact our office.

Sincerely,



Sharon Rannebarger
Associate

cc:file