

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 14, 2001 8:00 am**  
**Secretary of State**

08-14-2001 90006 030 \*\*\*558.75

**DOCUMENT # P97000033090**  
 1. Entity Name  
**THE BUY, SELL OR HOLD COMPANY**

Principal Place of Business  
**302 KNIGHTS RUN AVE.. #1250**  
**TAMPA FL 33602**  
**US**

Mailing Address  
**302 KNIGHTS RUN AVE.. #1250**  
**TAMPA FL 33602**  
**US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip  
 Country

Zip  
 Country

4. FEI Number  
**59-3426084**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent  
**TOTTY, S. MATTHEW**  
~~**756 CORAL REEF DR.**~~  
~~**TAMPA FL 33602**~~

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
**6006 Tropical Breeze Way**  
 City **Tampa** **FL** Zip Code **33602**

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>VOSKO, STEPHEN K</b> <b>583 MAGNOLIA CIRCLE</b> <b>HOUSTON TX 77024</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>TOTTY, S. MATTHEW</b> <b>756 CORAL REEF</b> <b>TAMPA FL 33602</b>	<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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Drew Lanzetta</b> <b>1137 Shoreside Way</b> <b>Mt. Pleasant, SC</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>29464</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Lee Magul</b> <b>1011 Royalist Road</b> <b>Mt. Pleasant, SC</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>29464</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Joseph Safina</b> <b>9 Fiesta Way</b> <b>Ft. Lauderdale, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>33301</b>
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 REQUIRED **Michael W. Heald** **8/8/01** **(813) 262-2600**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)