## 2000 UNIFORM BUSINESS REPORT (UBR)

## Mar 13, 2000 8:00 am DOCUMENT # **P97000041866** Secretary of State STREAMLINE ALUMINUM, INC. 03-13-2000 90031 007 \*\*\*150.00 Mailing Address Principal Place of Business 12651-1 METRO PKWY 12651-1 METRO PKWY FORT MYERS FL 33912-1306 FORT MYERS FL 33912 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0754863 Not Applicable Country \$8,75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BOEHM, ROBERT H JR Street Address (P.O. Box Number is Not Acceptable) 6649 HARTLAND STREET FORT MYERS FL 33912 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** DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition ☐ Delete TITLE TITLE BOEHM, KENNETH R NAME NAME **6881 HARTLAND STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE BOEHM, ROBERT H JR. NAME STREET ADDRESS 6649 HARTLAND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33912 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUTY-ST-7IP ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

☐ Delete

NAME

STREET ADDRESS

SIGNATURE: ROBERTAH: BOEHM JR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Addition

Change