

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90126 004 ***150.00

DOCUMENT # P97000044466

1. Entity Name

A M STEPIEN CO, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1048 KENWOOD DRIVE

3. Mailing Address

1048 KENWOOD DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DUNEDIN, FLORIDA

City & State

DUNEDIN, FLORIDA

4. FEI Number

59-3446236

Applied For

Not Applicable

Zip

34689

Country

USA

Zip

34689

Country

USA

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

MAREK STEPIEN

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

1048 KENWOOD DRIVE

City

DUNEDIN

FL

Zip Code

34689

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

03.29.02

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)** ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 P
NAME MAREK STEPIEN
STREET ADDRESS 1048 KENWOOD DRIVE
CITY-ST-ZIP DUNEDIN, FL 34689

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME ANNA STEPIEN
STREET ADDRESS 1048 KENWOOD DRIVE
CITY-ST-ZIP DUNEDIN, FL 34689

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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

Marek Stepien

/MAREK STEPIEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

03.29.02

Daytime Phone #

(727) 421-3312

CR2E034B (12/01)