

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 27, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90066 024 \*\*\*150.00

DOCUMENT # P97000079882

1. Entity Name

FLORIDA STEEL & WELDING, INC.

Principal Place of Business

Mailing Address

12885 44TH ST NORTH  
 CLEARWATER FL 33762

12885 44TH ST NORTH  
 CLEARWATER FL 33762-4727

2. Principal Place of Business

3. Mailing Address

12295 46TH ST N  
 Suite, Apt. #, etc.

12295 46TH ST N  
 Suite, Apt. #, etc.

City & State

City & State

CLEARWATER FL

CLEARWATER FL

Zip

Country

Zip

Country

FL 33762

33762 FL

4. FEI-Number

59-3467489

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

Name

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

City

FL

Zip Code

VAZQUEZ, RAFAEL  
 4625 118 AVE #102  
 CLEARWATER FL 34622

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, 2000 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 PD  
 NAME VAZQUEZ, RAFAEL  
 STREET ADDRESS 12885 44TH ST N  
 CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE PD  
 NAME VAZQUEZ RAFAEL ☒ Change ☐ Addition  
 STREET ADDRESS 12295 46TH ST N CLEARWATER FL 33762  
 CITY-ST-ZIP ☒ Change ☐ Addition

TITLE SD  
 NAME VAZQUEZ, GINA A  
 STREET ADDRESS 12885 44TH ST N  
 CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE SD  
 NAME VAZQUEZ GINA ☒ Change ☐ Addition  
 STREET ADDRESS 12295 46TH ST N CLEARWATER FL 33762  
 CITY-ST-ZIP ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
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 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ 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 #

04/20/2000 (727) 619-0106

CR2E034 (9/99)