FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT #: P98000050634

1. Entity Name: CUSTOM SCREENS AND ENCLOSURES, INC.

FILED

02 DEC -2 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 02 UBR

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2. Principal Place of Business	3. Mailing Address
4881 DISTRIBUTION Ct.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL	City & State
Zip: 32822 Country	Zip Country

4. FEI Number: 59-3556355 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: BAUM, JOHN V.

Street Address (P.O. Box Number is Not Acceptable): 213 S. SWOOPE AVE.

City: MAITLAND FL Zip Code: 32751

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. (NOTE: Registered Agent Signature required when changing)

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 NAME STREET ADDRESS CITY-ST-ZIP	DP BAUM, JOHN V. 213 S. SWOOPE AVE. MAITLAND, FL 32751
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900009900339
12/02/02--01065--004 **450.00

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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: Terry Davis 11-26-02 407-277-1028
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034B (12/01)

Zeltz

Custom Screens and Enclosures, Inc.
4881 Distribution Court
Orlando, FL 32822
Tel: 407-277-1028
Fax 407-273-8087

November 26, 2002

Division of Corporations
Florida Department of State
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Department of State:

Enclosed are our 2002 Uniform Business Report and fee of $450.00 for the years of 2000, 2001 and 2002.

Because the corporation did not receive the original uniform business report, we respectfully request waiver of a late fee.

Thank you for your consideration.

Sincerely,

Officer