## 2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** P98000053393 1. Entity Name INDUSTRIAL SYSTEMS OF FLORIDA INC.

## **FILED** May 12, 2002 8:00 am § Secretary of State 05-12-2002 90659 017 \*\*\*150.00

Principal Place of Business			Mailing Address							
2309 INDUSTRIAL BLVD.			3095 SPIREA STREET SARASOTA FL 34231		İ					
SARASOTA	FL 34234						II <b>66</b> 1) <b>68</b> 1) <b>68</b> 10 1	)	<b>a</b> 7 <b>878 a</b> 7777 ( <b>48</b> 7	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State			City & State			4. FEI Number 65-08445	573	<u> </u>	Applied For	
Zip		Country	Zip	Country		5. Certificate of Status Desire		\$8.75 A		
	6. Name	and Address of Current	Registered Agent	<u> </u>	<del></del>	7 Name and Address of No.	-	Fee Requi	reo	
			<u>g</u>	Name	<del></del>	7. Name and Address of Ne	W Registered	\gent		
STĒL MĀC	CH, ANTHON	V - See - Company	<u> يون نېښت</u> ندر پېدىيىد چونىس		e North State of the Sea	سينيسه مواودي ي⇔ابي يسف				
		'		Street Address			(P.O. Box Number is Not Acceptable)			
3095 SPI				<u> </u>						
SARASO	TA FL 34231									
				City			FL	Zip Co	de	
8. The abov	e named entity	submits this statement for	r the purpose of changing its	registered office	or registered	agent, or both, in the State of	f Florida	L	<del></del>	
				0		agont, or boar, in the blate o	ir riorida.			
SIGNATURE										
	Signature, typed o	or printed name of registered agent a	and title if applicable. (NOT)	E: Registered Agent sign	nature required whe	en reinstating)	DATE	·	<del></del>	
9. This corporation is eligible to satisfy its Intangible			EU E NOWI	U EEE IO 64E	^ ^^	<del> </del>			<del></del>	
Tax filing requirement and elects to do so.			FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00		U.UU	10. Election Campaign	Financing	\$5.0	00 May Be	
(See crite	eria on back)		Make Check Payab	uz ree will be:	ont of State	Trust Fund Contrib	ution. 👅 🗆		ed to Fees	
11.		OFFICERS AND (					<del></del>			
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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:

