

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 05, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000061026**1. Entity Name
L & S COMMERCIAL CONSTRUCTION, INC.Principal Place of Business
1157 BEACH BLVD.
JACKSONVILLE FL 32250
Mailing Address
1157 BEACH BLVD.
JACKSONVILLE FL 322502. Principal Place of Business
1155 BEACH BLVD.3. Mailing Address
1155 BEACH BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
JACKSONVILLE FLCity & State
JACKSONVILLE FL4. FEI Number
76-0565940Applied For
Not ApplicableZip Country
32250Zip Country
322505. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****MILLER STEPHEN O**
382 FIRST STREET SOUTH**JACKSONVILLE FL**
32250**7. Name and Address of New Registered Agent**Name
MILLER STEPHEN OStreet Address (P.O. Box Number is Not Acceptable)
840 BONAIRECity
JACKSONVILLE BEACH FL Zip Code
32250

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 **STEPHEN O. MILLER****01/05/2001**

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE VS ☐ Delete
NAME **MILLER LISA L**
STREET ADDRESS **382 1ST S**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**TITLE P ☐ Delete
NAME **MILLER STEPHEN O**
STREET ADDRESS **382 1ST ST S**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE VS ☒ Change ☐ Addition
NAME **MILLER LISA L**
STREET ADDRESS **840 BONAIRE**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**TITLE P ☒ Change ☐ Addition
NAME **MILLER STEPHEN O**
STREET ADDRESS **840 BONAIRE**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE: STEPHEN O. MILLER**PRES 01/05/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)