

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90034 011 ***550.00

DOCUMENT # P99000015735

1. Entity Name

ALTUG CONSULTING ENGINEERS, INC.

Principal Place of Business

**165 EAST HALL RD
MERRITT ISLAND FL 32952**

Mailing Address

**165 EAST HALL RD
MERRITT ISLAND FL 32952**

2. Principal Place of Business

3010 164th Place
Suite, Apt. #, etc.

3. Mailing Address

3010 164th Place
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Clearwater, FL

City & State

Clearwater, FL

4. FEI Number

59-3562300

Applied For
Not Applicable

Zip

33760

Country

Pinnelas

Zip

33760

Country

Pinnelas

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

6. Name and Address of Current Registered Agent

**ALTUG, NILGUN
165 EAST HALL RD
MERRITT ISLAND FL 32952**

7. Name and Address of New Registered Agent

Name **ALTUG, NILGUN**
Street Address (P.O. Box Number is Not Acceptable)
3010 164th Place
City **Clearwater** **FL** Zip Code **33760**

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/10/01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE **D** ☐ Delete
NAME **ALTUG, NILGUN**
STREET ADDRESS **1315 FIDDLER AVE.**
CITY-ST-ZIP **MERRITT ISLAND FL 32952**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **ALTUG, NILGUN**
STREET ADDRESS **3010 164th Place**
CITY-ST-ZIP **Clearwater, FL 33760**
☒ Address

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

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

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TITLE ☐ 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:

[Signature] **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/15/01 (727) 536-4450

CR2E034 (5/01)