2000 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 21, 2000 8:00 am Secretary of State DOCUMENT # P99000016672 1. Entity Name STEPHENSON SERVICES, INC. 08-03-2000 90039 027 ***150.00 Principal Place of Business Mailing Address 8924 N.W. 34TH ST 8924 N.W. 34TH ST. COOPER CITY FL 33024 COOPER CITY FL 33024 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 Applied For 65-0898817 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6: Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEPHENSON, RANDY Street Address (P.O. Box Number is Not Acceptable) 8924 N.W. 34TH ST. COOPER CITY FL 33024 Zip Code City tity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, 8. The above named a SIGNATURE d sout and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (5/00) ☐ Addition TITLE □ Delete TITE F Change NAME W. STEPHENSON NAME STREET ADDRESS STREET ADDRESS 33024 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-78 ☐ Delete ☐ Channe ☐ Addition TITLE TITI F NAME ... NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-73P

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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 Block 12 if changed, or on an attachmer

TITLE

NAME

STREET ADDRESS

City-St-ZiP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CANDY W. STE PHENSON PRESIDENT T

☐ Delete

Change

Addition

Stephenson Services, Inc. 8924 NW 34th Street, Cooper City FL 33024

July 28, 2000

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302

Dear Sir/Madam,

I am submitting my uniform business report. I do not believe I have ever received this before and was not aware I had to file and therefore, I missed the May deadline. I am submitting this report now with the \$150 filing fee. Please accept this and waive the penalty.

Thank you,

Randy Stephenson

President

This is my first year in business.