

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90406 050 ***158.75

DOCUMENT # P99000017934

1. Entity Name
SESTERHENN INTERNATIONAL, INC.

Principal Place of Business

5312 MARINA DRIVE
HOLMES BEACH FL 34217

Mailing Address

5312 MARINA DRIVE
HOLMES BEACH FL 34217

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3562600

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEPHENS, MARY L
2620-C MANATEE AVE. WEST
BRADENTON FL 34205

Name
RIEMER-SESTERHENN, BIRGIT A.

Street Address (P.O. Box Number is Not Acceptable)
5112 54th STREET W

City **BRADENTON** **FL** **Zip Code** **34210**

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 *B. Riemer-Sesterhenn* **B. RIEMER-SESTERHENN**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-11-02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

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FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	SESTERHENN, HERBERT	
STREET ADDRESS	2620 MANATEE AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	VP	<input type="checkbox"/> Delete
NAME	RIEMER-SESTERHENN, RICHARD	
STREET ADDRESS	2620 MANATEE AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	TVP	<input type="checkbox"/> Delete
NAME	RIEMER-SESTERHENN, BIRGIT A	
STREET ADDRESS	2620 MANATEE AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	S	<input type="checkbox"/> Delete
NAME	RIEMER-SESTERHENN, CAROLA	
STREET ADDRESS	2620 MANATEE AVE. WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SESTERHENN, HERBERT	
STREET ADDRESS	5112 54th STREET W	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIEMER-SESTERHENN, RICHARD	
STREET ADDRESS	5112 54th STREET W	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	TVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIEMER-SESTERHENN, BIRGIT A.	
STREET ADDRESS	5112 54th STREET W	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIEMER-SESTERHENN, CAROLA	
STREET ADDRESS	5112 54th STREET W	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RIEMER-SESTERHENN, ROBERT	
STREET ADDRESS	5112 54th STREET W	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *HERBERT SESTERHENN* **04-11-02** **941-778-4751**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)