

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019982

1. Entity Name

STEINHAUS AND SON, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91099 027 ***150.00

Principal Place of Business

Mailing Address

24111 REDFISH COVE
PUNTA GORDA FL 33955

24111 REDFISH COVE
PUNTA GORDA FL 33955

2. Principal Place of Business

3. Mailing Address

24111 REDFISH COVE

24111 REDFISH COVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PUNTA GORDA, FL.

City & State

PUNTA GORDA, FL.

4. FEI Number 65-0915814

Applied For

Not Applicable

Zip 33955

Country

Zip 33955

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SOPHIA PRESCOTT, MARGUNDA
412 SE 33 ST.
CAPE CORAL FL 33904

Name Esward, Christopher D.

Street Address (P.O. Box Number is Not Acceptable)

4031 SW 7th Place

City Cape Coral

FL

Zip Code 33914

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

Christopher D. Esward

04/22/2001

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 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 NAME ☐ Delete
S STEINHAUS, JLSE
STREET ADDRESS 24111 REDFISH COVE
CITY-ST-ZIP PUNTA GORDA FL 33955

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

TITLE NAME ☐ Delete
P STEINHAUS, HANS-DIETER
STREET ADDRESS 24111 REDFISH COVE
CITY-ST-ZIP PUNTA GORDA FL 33955

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Change ☐ Addition
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:

Dieter Steinhaus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/22/2001 (941)-637-9722

Date

Daytime Phone #

CR2E034 (10/00)