

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019982

1. Entity Name

STEINHAUS AND SON, INC.

Principal Place of Business

24111 REDFISH COVE
PUNTA GORDA FL 33955

Mailing Address

24111 REDFISH COVE
PUNTA GORDA FL 33955

2. Principal Place of Business

24111 REDFISH COVE

3. Mailing Address

24111 REDFISH COVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PUNTA GORDA, FL

City & State

PUNTA GORDA, FL

Zip

33955

Country

Zip

33955

Country

4. FEI Number

65-0915814

Applied For

Not Applicable

5. Certificate of Status Desired

 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

-7. Name and Address of New Registered Agent

Name ESWAY, 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. Esway

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 State10. 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

CR2E034 (10/00)

TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEINHAUS, JONSE		NAME	
STREET ADDRESS	24111 REDFISH COVE		STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL 33955		CITY-ST-ZIP	
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEINHAUS, HANS-DIETER		NAME	
STREET ADDRESS	24111 REDFISH COVE		STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL 33955		CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
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NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			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 addressee, with all other like empowered.

SIGNATURE: *Dieter S.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/22/2001 (941)-637-9722
Date Daytime Phone #