## 2001 UNIFORM BUSINESS REPORT (UBR)

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000021260					FILED Apr 05, 2001 8:00 am			
1. Entity Name SAW PALMETTO PRO	ODUCTS, INC.	Ĵ	<b>9</b> -6 • 1 <b>5</b> e			etary of 2001 90049 012		
Principal Place of Business		Mailing Address						
712 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408		712 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408				_ 94x;	, -	
2. Principal Place of Business P.O. Gov. 696		3. Mailing Address 635 F GATOR DR.						
Suite, Apt. #, etc. SW FARM RO.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State TNOIANTOWN FL		City & State LANTANA FL		4. 1	4. FEI Number 65-0899163 Applied For Not Applicable			
Zip 34956 1	ountry Mactin	33462	Palm Beac	h	Certificate of Status Desired	Fee Requ	Additional uired	
	Address of Current R	legistered Agent -	Name		PILICA TO THE PARTY OF THE PART	egistered Agent	<del>-</del>	
COHEN, FRED C 712 U.S. HIGHWAY NORTH PALM BEAC			Street A	ddress (P.O. E	Box Number is Not Acceptable	)VE	-	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		City /			FL 393	Code	
8. The above named entity sul	'A- 4L'	uhaf abasaina it		ANTAN			462	
SIGNATURE CYNTH	IA PLLIN	G SECRETARI	IE: Registered Apent signa)	ather	sins fering!	3/20/01	· .	
This corporation is eligible     Tax filing requirement and     (See criteria on back)	•		III FEE IS \$150. 001 Fee will be \$5 ible to Departmen	550.00 t of State	10. Election Campaign Fir Trust Fund Contributio	n. 🗆 Åd	5.00 May Be ded to Fees	
11.	OFFICERS AND D	IRECTORS Delete	12.	AD	DITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 11	
NAME PILLING, DEAL 1126 SW 21S CITY-ST-2IP BOCA RATON	T	Li Delete	NAME STREET ADDRESS CITY-ST-ZIP			_ `	ASE CONTINUAR SE	
TITLE BOOK PATOL	11 2 35 100	☐ Delete	TITLE	SECRETA	ey	Chang	pe Addition S	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	PILLING 1126 S	W ALST ST.	3486		
NAME		Delete	- TITLE NAME	VICE PA	BIGELEIZEN BIGELEIZEN			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	MIAM	N. COUNTRY	<u>a</u>		
TITLE Delete  NAME  STREET ADDRESS			TITLE NAME STREET ADDRESS	Washi	dunt burn David GATOR DR.	. Chang	Addition	
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP		INA, FL 334		ge Addition	
TITLE NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS			_ Chang		
TITLE		☐ Delete	CITY-ST-ZIP	<u> </u>	<del> </del>	Chang	ge Addition	
NAME STREET ADDRESS CITY-ST-ZIP		Land Million	NAME STREET ADDRESS CITY-ST-ZIP				ŀ	
13. I hereby certify that the info	supplemental report is/t lceiver or trustee empoy	rue and accurate and that vered to execute this repor	or the exemption star my signature shall he t as required by Cha	ave ine same:	119.07(3)(i), Florida Statutes. legal effect as if made under oda Statutes; and that my name	Dauri: Uriak Karri alii Onik	1 or Block 12 if	