

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90612 034 ***158.75

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027691

1. Entity Name

The Steel Group, Inc. ✓

DO NOT WRITE IN THIS SPACE

851816

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7330 NW 12th Street3. Mailing Address
7330 NW 12th StreetSuite, Apt. #, etc.
Suite 106Suite, Apt. #, etc.
Suite 106City & State
Miami, Fl.City & State
Miami, Fl.4. FEI Number
650916758Applied For
☒ Not ApplicableZip
33126Country
USAZip
33126Country
USA5. Certificate of Status Desired ☒\$8.75 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
 S. DADE CORPORATE SERVICES, INC.
 2300 Coral Way, Suite 103
 Miami, FL 33145
 City FL Zip Code

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

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) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
Charur, Elias A. Jr.
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
Sharpe, Laura C.
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
Charur, Carlos R. Jr.
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Zedan, Luis A.
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Zedan, Guillermo A.
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Charur, Emilio
7330 NW 12th Street, Ste 106
Miami, Fl. 33126

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address with all other like embossed.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

P9.1 72

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Attachment

DOCUMENT # P99000027691

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85/816

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3. Mailing Address

7330 NW 12th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 106

Suite 106

City & State

City & State

Miami, Fl.

Miami, Fl.

Zip

Zip

33126

33126

Country

Country

USA

USA

4. FEI Number

650916758

Applied For

Not Applicable

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Trust Fund Contribution.☐\$5.00 May Be
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charur, Carlos R. 7330 NW 12th Street, Ste 106 Miami, Fl. 33126	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charur, Elias A. 7330 NW 12th Street, Ste 106 Miami, Fl. 33126	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE
IN THIS SPACE

12. 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 on an attachment with an address, with all other information empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/02

305-459-4053

Date

Daytime Phone #

CR2E034B (12/01)

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