

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90077 019 ***150.00

DOCUMENT # P99000037663



1. Entity Name
NICK YESBIK CONSTRUCTION, INC.

Principal Place of Business
**13850 NW 50TH AVE.
CHIEFLAND FL 32626**

Mailing Address
**13850 NW 50TH AVE.
CHIEFLAND FL 32626**

2. Principal Place of Business
106 SW 140th Terrace

3. Mailing Address
106 SW 140th Terrace

Suite, Apt. #, etc.
Ste 3

Suite, Apt. #, etc.
Ste 3

City & State
Newberry FL

City & State
Newberry FL

Zip
32669

Country
Alachua

Zip
32669

Country
Alachua

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3589164**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**YESBIK, AMY L
13850 NW 50TH AVE.
CHIEFLAND FL 32626**

7. Name and Address of New Registered Agent

Name

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **YESBIK, NICK**
STREET ADDRESS **13850 NW 50TH AVE.**
CITY-ST-ZIP **CHIEFLAND FL 32626**

TITLE **VP** ☐ Delete
NAME **YESBIK, AMY L**
STREET ADDRESS **13850 NW 50TH AVE.**
CITY-ST-ZIP **CHIEFLAND FL 32626**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Chief Executive Officer** ☒ Change ☐ Addition
NAME **Nick Yesbik**
STREET ADDRESS **13850 NW 50th Ave**
CITY-ST-ZIP **Chiefland FL 32626**

TITLE **President** ☒ Change ☐ Addition
NAME **Amy Yesbik**
STREET ADDRESS **13850 NW 50th Ave**
CITY-ST-ZIP **Chiefland FL 32626**

TITLE **Chief Financial Officer** ☐ Change ☒ Addition
NAME **Max McBeck**
STREET ADDRESS **7371 NW 95th St**
CITY-ST-ZIP **Chiefland FL 32626**

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

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

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

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 303

Date

352 332 7773

Daytime Phone #

CR2E034 (10/02)