

2000 UNIFORM BUSINESS REPORT (UBR)

4/

FILED

May 22, 2000 8:00 am
Secretary of State

04-28-2000 90073 025 ***150.00

DOCUMENT # **P99000047753**

1. Entity Name

HENRY STEVENS CONSTRUCTION CORP.

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

2901 Audubon Dr.

2901 Audubon Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Gulfport, MS

Gulfport, MS

City & State

City & State

39501

Country

USA

39501

Country

USA

4. FEI Number

***65-0922725**

Applied For

☐ Not Applicable

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

Name

Henry Stevens

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

6215 W 22nd CT #4

City

Hialeah

FL

Zip Code

33016

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 remaining)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 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
STREET ADDRESS
CITY-ST-ZIP
D Sinclair, Amadeo Stevens
6215 W 22nd CT #4
Hialeah, FL 33016

☐ Delete

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

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☐ Change ☐ Addition

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 supplementary 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 changes, with all other like empowered.

SIGNATURE:

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-00

Date

1877.435.3757

Daytime Phone #

CR2E034 (9/99)