

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State
 09-12-2000 90149 034 ***550.00

DOCUMENT # P99000070404

1. Entity Name
C S SALES & SERVICE, INC.

Principal Place of Business
**1557 YOUNG AVENUE
 CLEARWATER FL 33756**

Mailing Address
**1557 YOUNG AVENUE
 CLEARWATER FL 33756**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3593686**

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

**FUCHS, LAWRENCE M ESQ.
 590 ROYAL PALM BEACH BLVD.
 ROYAL PALM BEACH FL 33411**

Name **Carol Stenstrom**
 Street Address (P.O. Box Number is Not Acceptable)
1557 YOUNG AVE
 City **CLEARWATER** FL **33756**

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 *Carol Stenstrom*

(NOTE: Registered Agent signature required when reinstating)

9/8/00
 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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PSTD STENSTROM, CAOL 1557 YOUNG AVENUE CLEARWATER FL 33756	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carol Stenstrom*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/8/00
 Date
OFFICE 37-446-9465
cell 727-424-0190
 Daytime Phone #

CR2E034 (5/00)

CS SALES & SERVICE INC
1557 YOUNG AVENUE
CLEARWATER FL 33756
(727) 446-9465

Attachment
P99000070404
D008516

September 8, 2000

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
PO BOX 1500
TALLAHASSEE FL 32302-1500

~~To Whom It May Concern:~~

Upon engaging the services of a CPA, I was asked about the status of the Corporate Report and filing fee. I did not have any knowledge of this requirement and had not received a UBR form. The CPA advised me to contact my Lawyer to see if the form had been filed on behalf of the corporation since he was designated as the registered agent. Apparently, the lawyer did not file the required form. He never responded to our inquiry and we had no knowledge of the over-sight until we received this second notice.

In view of the above circumstances, we request that the late filing fee be waived and refunded to us. All information on the accompanying UBR is complete and accurate to the best of our knowledge and ability.

Sincerely,



Carol Stenstrom
President