

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

0195395

DOCUMENT # P99000079244

1. Entity Name
FLORIDA STEEL CORPORATION

05-04-2001 90099 042 ***150.00

Principal Place of Business Mailing Address
9400 S DADELAND BLVD. PENTHOUSE 3 **9400 S DADELAND BLVD. PENTHOUSE 3**
MIAMI FL 33156 **MIAMI FL 33156**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
PO BOX 771893 **PO BOX 771893**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State 4. FEI Number Applied For
CORAL SPRINGS, FL **CORAL SPRINGS, FL** **65-0974157** Not Applicable
 Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required
33077 **USA** **33077** **USA** \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
SHELOW, PATRICK J Name **Patrick J. Shelow**
9400 S DADELAND BLVD, PENTHOUSE 3 Street Address (P.O. Box Number is Not Acceptable) **10791 New Sp**
MIAMI FL 33156 City **CORAL SPRINGS FL** Zip **33071**

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 _____ (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. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 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	PSTD SHELOW, PATRICK J 9400 S DADELAND BLVD, PENTHOUSE 3 MIAMI FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 if changed, or on an attachment with an address with all other like empowered.
SIGNATURE: _____ Date **04-25-01** Daytime Phone # **954 396 9902**

CR2E034 (10/00)