

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 20, 2003 8:00 am**  
**Secretary of State**  
08-20-2003 90047 001 \*\*\*150.00

0109659 AV

DOCUMENT # **V01128**

1. Entity Name  
**STEVE RABOW, INC.**



Principal Place of Business  
**1801 N. LAKESHORE DR.  
SARASOTA FL 34231  
US**

Mailing Address  
**1801 N. LAKESHORE DR.  
SARASOTA FL 34231  
US**



2. Principal Place of Business  
**1717 2nd Street**

3. Mailing Address  
**1717 2nd Street**

Suite, Apt. #, etc.  
**Suite G.**

Suite, Apt. #, etc.  
**Suite G.**

City & State  
**Sarasota, FL**

City & State  
**Sarasota, FL**

Zip  
**34236**

Country  
**USA**

Zip  
**34236**

Country  
**USA**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0307367**

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

**RABOW, STEPHEN D.  
1801 N. LAKESHORE DR  
SARASOTA FL 34231**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☐ Delete  
NAME **RABOW, STEPHEN D.**  
STREET ADDRESS **1801 N. LAKESHORE DR.**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **VT** ☐ Delete  
NAME **RABOW, KIMBERLY**  
STREET ADDRESS **1801 N. LAKESHORE DR.**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **8/18/03** Daytime Phone # **952-5092**

CR2E034 (4/03)

Attachment

SARASOTA DOWNTOWN & BEYOND | STEVE RABOW'S GUIDE BOOK

80139012  
#V01628



Rabow Communication Arts

Dear Sirs,

Please accept our request to waive the penalty for filing our 2003 Uniform Business Report as the original was not received. Since we have recently changed our business address, we attribute the lost form to this. Please note the change of address for our business in sections 3 and 4 of the attached Report. If you have any further questions, please do not hesitate to call.

Sincerely,

Greg Hornagold  
Director of Operations  
Rabow Communication Arts  
1717 Second Street, Suite G  
Sarasota, FL 34236  
941-952-9092