

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V04462

1. Entity Name  
SMITH REYNOLDS CORP.

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**FILED**  
**Jul 28, 2000 8:00 am**  
**Secretary of State**

07-28-2000 90151 049 \*\*\*150.00

Principal Place of Business  
21687 TOWN PLACE DRIVE  
BOCA RATON FL 33433  
US

Mailing Address  
21687 TOWN PLACE DRIVE  
BOCA RATON FL 33433  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 22-3120361

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

~~SIEGEL, RONALD L.~~  
2424 NORTH FEDERAL HIGHWAY  
SUITE 360  
BOCA RATON FL 33431

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.

SIGNATURE

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

(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. (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 D  
NAME SCHWARTZBERG, JEAN  
STREET ADDRESS 40987 TOWN PLACE DRIVE  
CITY-ST-ZIP BOCA RATON FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PRESIDENT  
NAME MAX ZARETSKY  
STREET ADDRESS 21687 TOWN PLACE DRIVE  
CITY-ST-ZIP BOCA RATON, FL 33433

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ 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 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/00

Date

561-368-2963

Daytime Phone #

Attachment  
DH# V04462  
DW75290

# SMITH REYNOLDS CORP

STEEL DISTRIBUTORS

P.O. BOX 6225  
BOCA RATON, FLORIDA 33427  
561 368 2963 FAX 561 368 2970  
Toll Free 1-877-95-STEEL  
e-mail: [smithreynolds1@aol.com](mailto:smithreynolds1@aol.com)

Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

July 19, 2000

Dear Sir:

I am enclosing the check of \$150.00 for Corporation Registration for the State of Florida. This is being filed with the second notice form as we did not receive the first notice due to an error in the address (which is circled and noted on the form).

This action is taken per direction of your office with whom I spoke this afternoon (July 19, 2000).

Sincerely,



Max Zaretsky, President