2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 31, 2001 8:00 am
Secretary of State
08-31-2001 90235 043 ***550.00

B0063008

DO NOT WRITE IN THIS SPACE

DOCUMENT # V05404

1. Entity Name
ACCURATE METAL WORKS INC

Principal Place of Business	Mailing Address
5700 TAYLOR Rd. #C2 NAPLES FL. 34109 US	5700 TAYLOR RD. #C2 NAPLES FL. 34109 US

2. Principal Place of Business	3. Mailing Address
	5760 18TH AVE N.W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: NAPLES FL
Zip / Country	Zip: 34119 / Country: US

4. FEI Number: 65-0301032 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WIEGOLD, SONYA K.
4801 WAX MYRTLE WAY
NAPLES, FL 34109

7. Name and Address of New Registered Agent

Name:

Street Address (P.O. Box Number is Not Acceptable): 5801 WAX MYRTLE WAY

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 $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	PT WIEGOLD, RICHARD H. JR. 5801 WAX MYRTLE WAY NAPLES FL 34109 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 5760 18th AVE N.W. NAPLES FL 34119 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPSD WIEGOLD, SONYA K. 5801 WAX MYRTLE WAY NAPLES FL 34109 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

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.

8/27/01

SIGNATURE: [signature] RICHARD H. WIEGOLD JR. (941) 597-7893
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PRESIDENT