

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90170 040 ***150.00

DOCUMENT # **V 32554**

1. Entity Name

FIREPLACE & BUILDING SPECIALTIES, INC.

DO NOT WRITE IN THIS SPACE

977910

2. Principal Place of Business

4701 N. DIXIE HWY.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON, FL

City & State

4. FEI Number

65-0329139

Applied For

Not Applicable

Zip

33431

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CONNIE GEISINGER

Street Address (P.O. Box Number is Not Acceptable)

5831 MONTEREY LANE

DELRAY BEACH

City

FL

Zip Code

33484

**DO NOT WRITE
IN THIS SPACE**

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

Connie Geisinger

Connie Geisinger

8/28/02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
CONNIE GEISINGER
5831 MONTEREY LANE
DELRAY BEACH, FL 33484**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SECRETARY
LILLY STUART
5831 MONTEREY LANE
DELRAY BEACH, FL 33484**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address with all other like empowered.

SIGNATURE:

Connie Geisinger Pres.

8/28/02 (561) 994-5508

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment
Dir. #

V 32554

972910

Fireplace & Building Specialties, Inc.

4701 North Dixie Highway • Boca Raton, FL 33431-5031

8-28-02

TO WHOM IT MAY CONCERN:

Due to our mail boxes being vandalized over a several month period, renewal form was not received. Enclosed, blank form received on third request.