

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90061 048 ***550.00

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DOCUMENT # V39190

1. Entity Name

C&S MARINE BROKERAGE CO.



Principal Place of Business

3212 NE 32ND ST
FORT LAUDERDALE FL 33308
US

Mailing Address

3212 NE 32ND ST
FORT LAUDERDALE FL 33308
US

OLD ADDRESS

2. Principal Place of Business

421 N. Andrews Ave
Suite, Apt. #, etc.

3. Mailing Address

421 N. Andrews Ave
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

FT. Lauderdale, FL

City & State

FT. Lauderdale, FL

4. FEI Number

65-0391251

Applied For

Not Applicable

Zip

33301

Country

USA

Zip

33301

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SAUMSIEGLE, CHRISTOPHER
2617 NE 35TH DRIVE
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

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

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

(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

TITLE P
NAME SAUMSIEGLE, CHRISTOPHER ☐ Delete
STREET ADDRESS 3212 NE 32ND ST
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Saumsiegle, Christopher
STREET ADDRESS 421 N. Andrews Ave.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

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

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

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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

Daytime Phone #

9/8/03 (954) 566-8811

CR2E034 (4/03)