

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED IN THE OFFICE OF THE CLERK OF THE DIVISION OF CORPORATION  
N99000006369  
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DOCUMENT # N99000006369  
1. Entity Name  
Sharlène's ANGELO NEARY INC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of business  
3150 SW 52 AVE  
# 212  
City & State  
Pembroke Park FL  
Zip  
33023  
Country  
Broward

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

8/11/03 01067 003 \$70.<sup>00</sup>  
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4. FEI Number 65-0957335  
Applied For  
Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
7. Name and Address of Current Registered Agent  
Name Sharlène HUMM  
Street Address (P.O. Box Number is Not Acceptable)  
3150 SW 52 AVE  
Suite 212  
City Pembroke Park FL Zip Code 33023

8. The above named entry 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 Sharlène Humm DATE 9/21/03

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CEO Sharlène Humm #212 3150 SW 52nd Ave #212 Pembroke Park FL 33023
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ED Christina Pratt 3249 49th St Dania FL 33004
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ED Walter Pratt 3249 49th St Dania FL 33004
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ED Michael Humm #212 3150 SW 52nd Ave #212 Pembroke Park FL 33023
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ED Maurice Conceicao 3249 49th St Dania FL 33004
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ED Clamissa Turel 42 Allen Rd Hollywood FL 33025

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 617, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address. With all other like empowered.

SIGNATURE: Sharlène Humm Sharlène Humm 9/21/03 954-981-5616  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

CR2E037B (12/02)

EULA

N 99000006369

Please find the  
3rd form I have  
sent the office -  
I will also mail  
in case you don't have  
the other 2.  
Address has changed

Sharlene Humm

@E 954-981-5616

Because it is marked inactive I  
could not pull my form from Internet.