

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90286 030 ***150.00

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DOCUMENT # P00000109455

1. Entity Name
URBAN ESTATES, INCORPORATED



Principal Place of Business
3814 S. KENWOOD AVE.
TAMPA FL 33611

Mailing Address
3814 S. KENWOOD AVE.
TAMPA FL 33611

11032721



2. Principal Place of Business
550 N. Reo St., Suite 300
Suite, Apt. #, etc.
Tampa, Florida 33609
City & State

3. Mailing Address
550 N. Reo St., Suite 300
Suite, Apt. #, etc.
Tampa, Florida 33609
City & State

CHECK HERE IF MAKING CHANGES

Zip Country Hillsborough Hillsborough

4. FEI Number 59-3691114
Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
BULEJCIK, JEFFREY J
3814 S. KENWOOD AVE.
TAMPA FL 33611

7. Name and Address of New Registered Agent
Name Trisha Seguin
Street Address (P.O. Box Number is Not Acceptable)
6700 Citicorp Drive
City Tampa FL Zip Code 33619

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 *Trisha Seguin* Trisha Seguin, Secretary & Treasurer
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE April 12, 2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	DPS BULEJCIK, JEFFREY J 3814 KENWOOD AVE TAMPA FL 33611 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEGUIN, JEREMIE 52 INGLESIDE AVE WORCESTER MA 01604 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SEGUIN, TRISHA M 52 INGLESIDE AVE WORCESTER MA 01604 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAUKSZ, BROOK 80 SUTTON ROAD WEBSTER MA 01570 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, President Jeremie Seguin 550 N. Reo St., Suite 300 Tampa, Florida 33609 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, Treasurer, Secretary Trisha Seguin 550 N. Reo St., Suite 300 Tampa, Florida 33609 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Brooke Dauksz 550 N. Reo St., Suite 300 Tampa, Florida 33609 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Terri Wood 550 N. Reo St., Suite 300 Tampa, Florida 33609 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Trisha Seguin* Trisha Seguin, Secretary & Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date April 12, 2003 Phone #

CR2E034 (10/02)