

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90006 025 ***150.00

DOCUMENT # P00000110361

1. Entity Name
SEVEN OAKS TRADING CO.

Principal Place of Business 4400 N FEDERAL HIGHWAY SUITE 44 BOCA RATON FL 33431	Mailing Address 4400 N FEDERAL HIGHWAY SUITE 44 BOCA RATON FL 33431
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2. Principal Place of Business 513 Bankhead Hwy.	3. Mailing Address 513 Bankhead Hwy.
Suite, Apt. #, etc. No. 126	Suite, Apt. #, etc. No. 126



DO NOT WRITE IN THIS SPACE

City & State Carrollton, Georgia	City & State Carrollton, Georgia	4. FEI Number 65-1057559	Applied For <input type="checkbox"/>
Zip 30117	Country USA	Country USA	Not Applicable

6. Name and Address of Current Registered Agent FELDMAN, RICHARD A 4400 N FEDERAL HIGHWAY SUITE 44 BOCA RATON FL 33431	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		P/D M. Richard Kaufmann, Jr. 513 Bankhead Hwy., No. 126 Carrollton, GA 30117	
		V/S/D Janice H. Whitmire 513 Bankhead Hwy., No. 126 Carrollton, GA 30117	

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.

SIGNATURE: _____ **4-25-01** **(770) 926-7378**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)