

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90176 018 ***150.00

DOCUMENT # P02000030677

1. Entity Name
BIRDSALL INVESTMENTS, INC.



Principal Place of Business
10820 SW 200 DR. STE 409
MIAMI FL 33197

Mailing Address
10820 SW 200 DR. STE 409
MIAMI FL 33197

2. Principal Place of Business

3. Mailing Address

25105 Northlake DR **25105 Northlake DR**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sanford, FL

City & State
Sanford, FL

4. FEI Number

02-0562856

Applied For

Not Applicable

Zip **32773** **Country** **USA**

Zip **32773** **Country** **USA**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RICHARDSON, CARL A
5911 W FLAGLER ST
MIAMI FL 33144

Name

Jeremy Birdsal

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

25105 Northlake DR

City

Sanford

FL

Zip Code

32773

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/6/2003

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☒ Addition
President/Director	Jeremy Birdsal	25105 Northlake DR	Sanford, FL 32773		

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]* **Jeremy Birdsal, Director** **4/5/2003** **407-323-7233**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)