

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2003 8:00 am**  
**Secretary of State**

09-12-2003 90101 003 \*\*\*550.00

0033973  
AV

<b>DOCUMENT #</b>	<b>P02000040350</b>
1. Entity Name <b>IZZY DESIGN, INC.</b>	



Principal Place of Business <b>3309 CARAMBOLA CIR S. COCONUT CREEK FL 33066</b>	Mailing Address <b>3309 CARAMBOLA CIR S. COCONUT CREEK FL 33066</b>
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2. Principal Place of Business <b>4940 NW 86<sup>th</sup> TERRACE</b>	3. Mailing Address <b>4940 NW 86<sup>th</sup> Terrace</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State <b>Lauderhill, FL</b>	City & State <b>Lauderhill, FL</b>	4. FEI Number <b>04-3652039</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>33351</b>	Country <b>Broward</b>	Zip <b>33351</b>	Country <b>Broward</b>
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent <b>PATENAUE, ISABELLE 3309 CARAMBOLA CIR S. COCONUT CREEK FL 33066</b>		7. Name and Address of New Registered Agent Name <b>Isabelle Patenaude</b> Street Address (P.O. Box Number is Not Acceptable) <b>4940 NW 86<sup>th</sup> terrace</b> City <b>Lauderhill</b> <b>FL</b> Zip Code <b>33351</b>	
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00</b> After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD PATENAUE, ISABELLE 3309 CARAMBOLA CIR S. COCONUT CREEK FL 33066</b> <input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

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:** Isabelle Patenaude **9-4-03** **954-536-8321**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)



Attachment

# Division of Corporations

80147798  
EIN 04-3652039

9/4/03 4:44 PM

## Receipt

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

Document Number: **P02000040350**

Tracking Number: **000022771430**

The charge for your UBR is  
**\$550.00**

9-4-03  
tried to pay  
on line for 3-days  
DIDN'T WORK

If you want to review your document, use the browser back button to return to page 1 of the data entry. Use the browser forward button to come back to this page.

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If you have any questions, please contact our help desk at (850) 245-6939. M-F 8-5

To proceed to pay for the UBR, press the CONTINUE button below.

By pressing the CONTINUE button, your UBR will be placed in processing and no additional UBRs may be filed for this corporation until this one is processed.

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