

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


FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90344 050 ***150.00

005774 AV

DOCUMENT # P02000116801

1. Entity Name
BOLDEN HOLDINGS CORPORATION



Principal Place of Business
**19200 NW 11 AVE
MIAMI FL 33169**

Mailing Address
**19200 NW 11 AVE
MIAMI FL 33169**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
03-0440387

Applied For
 Not Applicable

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

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent
**FLORIDA AGENT SERVICES INC
1221 BRICKELL AVE STE 900
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **Gary J. Bolden**

Street Address (P.O. Box Number is Not Acceptable)
19200 N W 11th Avenue

City **MIAMI** FL Zip Code **33169**

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 *Gary J. Bolden* DATE **7/8/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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	PD BOLDEN, GARY 19200 NW 11 AVE MIAMI FL 33169	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOLDEN, FRANCINA 19200 NW 11 AVE MIAMI FL 33169	<input 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
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		<input type="checkbox"/> Change <input 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
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: *Gary J. Bolden* DATE: **7/8/03** DAYTIME PHONE #: **305-401-3231**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

Attachment

90142530

BOLDEN HOLDINGS CORPORATION

19200 NW 11th Avenue

Miami, FL 33169

Francina Bolden, Director
Gary Bolden, Director

July 7, 2003

Florida Department of State
Secretary of State
Glenda E. Hood
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Document #:

P020000116801

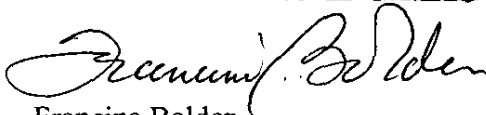
Dear Ms. Hood:

The purpose of this letter is to inform you that we did not receive the prior notice requesting this report. We are a new corporation. This is the first time we have received anything like this. Our desire is to completed abide by all rules and regulations established by government, without fail.

Please waive the late fee and find enclosed the \$150.00 filing fee which would have been mailed immediately had we received this request.

Thank you for your cooperation.

Sincerely,



Francina Bolden

[Faint, illegible text at the bottom of the page, possibly a stamp or bleed-through.]