**FILED** 

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

## Jan 22, 2003 8:00 am **Secretary of State** P96000076779 **DOCUMENT #** 01-22-2003 90148 038 \*\*\*150.00 1. Entity Name BOOKKEEPING AND MUCH MORE, INC. Principal Place of Business Mailing Address 2713 S.W. 12 COURT 2713 S.W. 12 COURT DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0693529 Not Applicable Zip Zip Country Country \$8.75 Additional --- 5. - Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HULL, JANET F Street Address (P.O. Box Number is Not Acceptable) 2713 S.W. 12 COURT **DEERFIELD BEACH FL 33442** City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. JANET HULL AS TRUSTEE Change TITLE ☐ Delete TITLE TANET HULL REVOCABLE TRUST ADREL MENT HULL, JANET F NAME NAME 2713 S.W. 12 COURT STREET ADDRESS STREET ADDRESS 2713 5W 12 CT CITY-ST-ZIP DEERFIELD BEACH FL 33442 CITY-ST-ZIP D Delete TITLE NAME **HULL, JACQUELYN** NAME STREET ADDRESS STREET ADDRESS 1266 S. MILITARY TRAIL, #551 DEERFIELD BEACH FL 33442 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied why 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 of trustee employees to trustee employees the trustee this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver of changed, or on an attachment with n addres:

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP