2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N33210

City-St-Zip:

TAMPA, FL 33647

Entity Name: THE 301 HOUSE INC

FILED May 02, 2003 Secretary of State

Entity Nar	ne: THE 301	HOUSE, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
8601 BOW TAMPA, FI	'LES ROAD _ 33637						
Current Mailing Address:			New Maili	New Mailing Address:			
8601 BOW TAMPA, FI	'LES ROAD _ 33637 US	3					
FEI Number:	59-2961828	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
ZIMMERMAN, SUSAN 1031 CARDONNA ST TAMPA, FL 33619 US			5108 ST. C	ZIMMERMAN, SUSAN 5108 ST. CHARLES PLACE TAMPA, FL 33610 US			
The above in the State		submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or bo	oth,	
SIGNATURE: SUSAN ZIMMERMAN					05/02/2003		
	Electron	ic Signature of Registered Age	ent		Date	_	
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DC () KLINKMAN, DO 4301 LYNDENV BRANDON, FL	VOOD DR	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	DC () NADUE, GARY 8518 BOWLES TAMPA, FL 336		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	TD () ZIMMERMAN, S 1031 CARDONI TAMPA, FL 336	NA ST	Title: Name: Address: City-St-Zip:	ZIMMERMAN	IARLES PLACE		
Title: Name: Address:	COOPER, CINE	Delete Y FION OAKS DR APT 16	Title: Name: Address:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SUSAN ZIMMERMAN TD 05/02/2003