

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

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90073 008 ***150.00

DOCUMENT # F01000002458

1. Entity Name

SFC CONTRACT SERVICES, INC.

90144160

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2299 HIGHWAY 485

3. Mailing Address
2299 HIGHWAY 485

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ROBELINE LA

City & State
ROBELINE LA

4. FEI Number
721313455

Applied For
Not Applicable

Zip
71469

Country
USA

Zip
71469

Country
USA

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

7. Name and Address of Registered Agent

Name
A1A REGISTERED AGENT, INC.

Street Address (P.O. Box Number is Not Acceptable)
92 SADBERRY ROAD
26 S.E. 2ND AVENUE SUITE 1036

City MIAMI QUINCY FL Zip Code 33194 32351

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.

SIGNATURE

PAUL SMITH, VICE-PRESIDENT

07-16-03

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

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	TERRY SKLAR	168 Bayou Pierre 107 GOOCH ROAD ROBELINE LA 71469	Cut Off Rd. Natchitoches, LA 71457				
ST	LANELLE F SKLAR	168 Bayou Pierre 107 GOOCH ROAD ROBELINE LA 71469	Cut Off Rd. Natchitoches, LA 71457				
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

TERRY SKLAR, PRESIDENT

7/9/03

318-352-1096

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DEPT. PHONE #

CR2E034B (12/01)