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

## **DOCUMENT #**

321376

1. Entity Name

BRADLEY'S CHAIRS AND SOFAS, INCORPORATED



## **FILED** Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90436 039 \*\*\*158.75

						OF WE						
13055 STARK		1305	Mailing Address 13055 STARKEY ROAD									
LARGO FL 3	3773	ger man en	LARG	60 .FL 33773.	•							
2. Principal I	Place of Business	3. Ma	3. Mailing Address									
Suite, Apt	. #, etc.	Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State			City	City & State			4. FEI Number 59-1204		04543		pplied For lot Applicable	
Zip	Zip Country				/	5. Certificate of Status Desire		esired 💢	\$8.75 Additional Fee Required			
	6. Name and	Address of	Current Register	ed Agent				7. Name and Address o	f New Registere	d Agent		
		· ·		يدا المحادثين ومنهم		Name		, .				
	, MICHAEL P			Street Addrer			ress (P.C	(P.O. Box Number is Not Acceptable)				
13055 STARKEY RD												
LARGO F	L 33773											
						City			F	_		
8. The above the obligation	e named entity su tions of registered	bmits this state Lagent.	ement for the purp	ose of changing its	s registered	office or re	gistered	agent, or both, in the Sta	ate of Florida. I ar	n familiar with,	, and accept	
SIGNATURE	Signature, typed or pri	nted name of registr	ered agent and title if app	olicable. (NOTI	E: Registered A	gent signature	required who	en reinstating)	DATE			
	ILE NOW!!! F	EE IC \$150	00			t-de-d-					···	
Afte	r May 1, 2003 F k Payable to Fig	ee will be \$!	550.00					9. Election Camp Trust Fund Co	•		00 May Be d to Fees	
10.	-		RS AND DIRECTO	IRS	11.				TO OFFICERS AN	VD DIBECTOR	S IN 11	
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NAME	BRADLEY, PA	UL A JR		Delete	NAME	ĺ					Addition	
STREET ADDRESS	13055 STARK				STREET	ADDRESS						
CITY-ST-ZIP	LARGO FL 33	773			CITY-ST	-ZIP					İ	
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NAME	BRADLEY, MIC				NAME							
STREET ADDRESS	13055 STARK				STREET	address						
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CITY-ST-ZIP	<u></u>				City-St	-ZIP		_				
12. I hereby o	certify that the info	rmation suppl	ied with this filing	does not qualify for	the evemn	tion stated	in Section	on 119 07(3)(i). Florida Si	atutes. I further of	ertify that the is	oformation	

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:**