

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90110 001 ***150.00

0635489 AV

DOCUMENT # 372143

1. Entity Name

EXPLOSIVE ENERGIES CO. INC.



Principal Place of Business

**3200 70TH STREET, SW
NAPLES FL 34105
US**

Mailing Address

**3200 70TH STREET, SW
NAPLES FL 34105
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1310154

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

**OREN, PAUL E
3200 70TH STREET, SW
NAPLES FL 34105**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Paul E Oren
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/03

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCM OREN, PAUL E 3200 70TH STREET, SW NAPLES FL 34105	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OREN, THAD 3200 70TH STREET, SW NAPLES FL 34105	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ND NICOL, LANIA OREN 3470 19TH AVE SW NAPLES FL 34117	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OREN, CRAIG D. 1782 TAYLOR CREEK ROAD WEEMS VA 22576	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OREN, Kathryn E. 3200 70th St. SW. Naples, FL 34105	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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:

Paul E Oren
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/03

239-262-8249

Date

Daytime Phone #

CR2E034 (10/02)