2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

497635

1. Entity Name

C. & C. LYCOURIS PROPERTIES, INC.



FILED Apr 21, 2003 8:00 am Secretary of State 04-21-2003 90364 023 ***150.00

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2	

Principal Place of Business 827 N ATLANTIC BLVD FT LAUDERDALE FL 33304			2421	Mailing Address 2421 N.E. 7TH PLACE FT. LAUDERDALE FL 33304												
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 Numb	^{Der} 59-10	670957			_	applied For lot Applicable	}	
Zip	Country			Zip Coun			ntry	5. Certificate of Status Desired			Desired	S8.75 Additional Fee Required				
	6. Name	and Address	of Current F	Register	ed Agent			7.	Name an	d Address]
2700 EAS	akos, eliz T oaklane	abeth Park blvd			isan i n	•	Street Add	Iress (P.O.	Box Numb	er is Not A)	- "		÷	
Suite D Fort Lauderdale FL 33306-1623							City			_		F	:L	Zip Co	de	
	named entity ions of regist		tatement for	the purp	oose of changing its	egistere	ed office or re	egistered a	igent, or bo	oth, in the S	tate of Flo	rida. I a	m famili	ar with	, and accept	
SIGNATURE .	Signature, typed	or printed name of re	gistered agent ar	nd title if app	olicable. (NOTE	Registere	d Agent signature	required when	reinstating)	-,		DAT	Ē			
After	May 1, 200	! FEE IS \$1 3 Fee will be Florida Depa	\$550.00	State						ection Cam ust Fund C		_			00 May Be	
10.		OFFIC	CERS AND D	DIRECTO	ORS .	11.		A	DDITIONS	/CHANGES	S TO OFF	ICERS A	ND DIR	CTO	RS IN 11	j _
	2421 N.E.	, CATHERINE 7TH PLACE RDALE FL 33			☐ Delete									Change	☐ Addition	CR2E034 (10/02)
TITLE NAME STREET ADDRESS	VS LYCOURIS 2421 N.E.	, Stephen 7th Place Rdale FL 33			☐ Delete		1							Change	☐ Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>-</u>		☐ Delete			<u>.</u>		-		•		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Delete						٠			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					□ Delete									Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		infanil		Maile City	Delete	CITY-	E ET ADDRESS - ST- ZIP		440.07		0			Change	Addition	

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:

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR