FILED

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 546245 1. Entity Name KEVIN J. LOY ENTERPRISES, INC.					Feb 28, 2002 8:00 am Secretary of State 02-28-2002 90053 037 ***158.75				
Principal Place 2502 SW 19T FT. LAUDERD		Mailing Address 2502 SW 19TH ST FT. LAUDERDALE FL 33312							
2. Principal Place of Business 1200 Clint Moore Road 3. Mailing Address						<u> </u>			
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE				
City 0 Ct-4	SCARATON, FL	City & State			4. FEI Number 59-4	1769241	<u> </u>	plied For ot Applicable	}
Zip 334	Country	Zip	Country		5. Certificate of Status	Desired 🛱	\$8.75 Add	ditional	
	6. Name and Address of Current R	egistered Agent			7. Name and Address	of New Registered	d Agent		_
LOY, KEVIN J. 2502 SW 19TH ST				Name Street Address (f	idress (P.O. Box Number is Not Acceptable)				
FT. LAUDERDALE FL 33312				City		F	Zip Cod	e	-
8. The above	named entity submits this statement for	the purpose of changing its re	egistered	office or register	ed agent, or both, in the				
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: I	Registered Ag	gent signature required	when reinstating)	DATE	<u> </u>		
9. This corpo Tax filing (See criter	FILE NOW!!! After May 1, 2002 Make Check Payable	Fee wil	l be \$550.00	10. Election Campaign Financing S5.00 May Be Trust Fund Contribution. Added to Fees					
11.	OFFICERS AND D	RECTORS	12.		ADDITIONS/CHANGE	S TO OFFICERS AN	ND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOY,KEVIN J. 2502 SW 19TH ST FT. LAUD FL	☐ Delete	TITLE NAME STREET A CITY-ST-	- 1			☐ Change	☐ Addition	R2E034 (9/01
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LOY,MERCEDES P. 2502 SW 19TH ST FT. LAUD,FL	☐ Delete	TITLE NAME STREET A	[☐ Change	Addition	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST		-		☐ Change	Addition	
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indicated of the cor	certify that the information supplied with the on this report or supplemental report is the poration or the receiver or trustice empower or on an attachment with an address, with the control of the con	rue and accurate and that my rered to execute this report as	signature equired	tion stated in Sec shall have the s by Chapter 607	ction 119.07(3)(i), Florida same legal effect as if ma , Florida Statutes; and tha	Statutes. I further co de under oath; that at my name appears	ertify that the in I am an officer s in Block 11 or	nformation or director Block 12 if	