2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 556147

1. Entity Name

Principal Place of Business

2131 HOLLYWOOD BLVD., SUITE 508

TURBO INTERNATIONAL, INCORPORATED



Mailing Address 2131 HOLLYWOOD BLVD. SUITE 508

HOLLYWOOD) FL 33020		HOLLYWOOD FL 33020					•				
2. Principal	Place of Busin	ness	1 3 Ma	illing Address								
	. 1000 01 2001	1000	J. Ivialing Address					A TOWNS OF THE PARTY OF THE PAR				
Suite, Apt	i. #, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & Sta	ite		City & State				4	4. FEI Number 59-1799130 Applied For Not Applicable				
Zip					Coun	Country -		- Certificate of Status Desired	□. \$8.7		ditional	
	6. Name	and Address of Current	Register	ed Agent			7.	. Name and Address of New Regis				
TION MOUNT						Name						
	WICHAEL S.		Street Addre				ddress (P.O.	ss (P.O. Box Number is Not Acceptable)				
	LLYWOOD E	SLVD.										
SUITE 508												
HOLLYWO		City				FL Z	ip Cod	le				
8. The above named entity submits this statement for the purpose of changing its registered office							ragistared s	grant or both in the Ctate of Elected				
the obliga	tions of regist	ered agent.	, inc parp	occordinging its	registere	ed office of	registered a	agent, or botti, in the State of Florida	. I am tamilia	r with,	and accept	
CIONATURE											{	
SIGNATURE	Signature, typed	or printed name of registered agent a	and title if app	olicable. (NOT	: Registered	d Agent signatur	re required when	reinstating)	DATE			
F	ILE NOW!!	! FEE IS \$150.00					7.4.					
After May 1, 2003 Fee will be \$550.00								9. Election Campaign Financi		\$5.0	0 May Be	
Make Check	k Payable to	Florida Department of	State	!				Trust Fund Contribution.		Added	to Fees	
10.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND I	DIRECTO	IRS .	11.		A	DDITIONS/CHANGES TO OFFICER	RS AND DIRE	CTOR	S IN 11	
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/03

954922 9335

FILED

Mar 12, 2003 8:00 am Secretary of State

03-12-2003 90143 012 ***150.00

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