NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 03, 2003 8:00 am Secretary of State

	MENT # 7/94	フ グ。	THE ST	Secretary	oi State
1. Entity Nam	MENT # 7094	f.s		04-03-2003 9014	14 016 **** 61.25
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	DO NOT WRITE	IN THIS SE	ACE		
2. Principal P	lace of Business ; (- 3. Mailing Address			
640	1 Hiverbend Ci	6401 RIVER	bend (ir.		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN T	HIS SPACE
City & State	e ~//	City & State		4. FEI Number	Applied For
7	ampa, FL.	Tempa	Fl.		Not Applicable
Zip 🤰 1	ampa, FL. Gountry borkough	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional
	all shokough	33610	Hillsbiogisch		Fee Required
	\$ 10 m		Name O	7. Name and Address of Current Regist	tered Agent
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			Street Address (PO_Box Number is Not Acceptable)	IRI
	IN THIS SP	ACE			
			City =	· · · · · · · · · · · · · · · · · · ·	FL Zip Code
				1 / 2	- 1 00010
	named entity submits this statement for ions of registered agent.	r the purpose of changing its r	egistered office or register	ed agent, or both, in the state of Florida. It	am familiar with, and accept
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CICNIATURE	ALVIN ORDIWA Signature, typed or printed name of registered agent a	ey Sm.		4/,	1/03
SIGNATURE -	Signature, typed or printed name of registered agent a	and little if applicable. (NOTE:	Registered Agent signature required		ATE .
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	FEE IS \$61.25	9. Election Cam Trust Fund Co	· ·		neck Payable to
	FEE IS \$61.25 Initial or Amended UBR		· ·		neck Payable to partment of State
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10.	Initial or Amended UBR	Trust Fund Co	ontribution.		
10.	OFFICERS AND DIF	Trust Fund Co	ontribution.		
10. TITLE NAME	Initial or Amended UBR	Trust Fund Co	ontribution.		
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