2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

824208 **DOCUMENT #**

1. Entity Name

SIGNATURE

TATE HOLDINGS INC



FILED Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90092 046 ***150.00

DAN BURNS F	REAL ESTATE HOL	LDIINGS, INC.						
Principal Place of Business 1036 (BOCIDA BOAD DELRAY-BEACH FL 33483		Mailing Address 1036 BOCIDA ROAD DELRAY BEACH FL 33483						
2. Principal Place of Business		3. Mailing Address Bucida		- 1 TORONO 10150 HOW BIRST THEM GRANT 1015 EVENT STORY GROUP BIRST GROUP EVENT COSY				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number 59-1299542 Applied For Not Applicable				
Zip :	Country	Zíp	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
BURNS, DANIEL 1036 BOCIDA F DELRAY BCH F	E ROAD			Address (P.O. Box Number is Not Acceptable)				

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.

City

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip Code

Make Check	Payable to Florida Department of State				noor and commodition				
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BURNS,DANIEL E 1036 BUCIDA ROAD DELRAY BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, I		Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SICILIANO, MICHAEL J. 1233 BRCAKERS WEST BLVD WEST PALM BEACH FL 33411	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SICILIA 1860 I BLEAK	ano, Michaels Elagler Estyler Exp West Primbon, Fu	TX Change DRIVE	Addition		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		

12. I hereby certify that the information supplied with this filling 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, wi