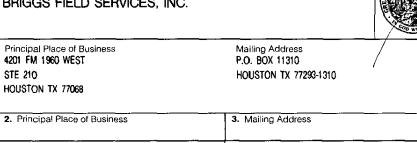
## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

F0000002929

1. Entity Name BRIGGS FIELD SERVICES, INC.



**FILED** May 05, 2003 8:00 am § Secretary of State

05-05-2003 90276 032 \*\*\*150.00

HOUSTON TX 77068													
2. Principal Place of Business			3. Mailing Address				_			H BARH BEHI OB	10 11610 10160	17070 1071 1001	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES					
City & Stat	e	<del></del> _	City & State				4.	4. FEI Number 76-0399207				pplied For lot Applicable	
Zip Country			Zip		Coun	Country		Certificate of Stat	us Desired		\$8.75 Ad	iditional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent							
						Name							
HARRISON	1, LLOYD						Street Address (P.O. Box Number is Not Acceptable)						
1036 SOU	TH POINTE	ALEXIS DRIVE				Silest Address (P.O. Box Number is Not Acceptable)							
TARPON S	Springs fl	34689											
											Lance		
						City				FL	Zip Cod	je	
	named entity ions of registe	v submits this statement fo ered agent.	r the purp	ose of changing its	registere	ed office or re	egistered ag	gent, or both, in th	e State of Fk	orida. I am fa	miliar with,	, and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if app	licable (NOT	E: Registere	d Agent signature	required when r	einstating)		DATE		<u> </u>	
								Τ					
		! FEE IS \$150.00 3 Fee will be \$550.00				9. Election (	Campaign Fir		\$5.0	<b>)0</b> May Be			
		Florida Department of	f State					Trust Fund	d Contributio	n. 🗆	Adde	d to Fees	
10. OFFICERS AND DIRECTORS							ΔΓ	L DDITIONS/CHAN	GES TO OFF	ICERS AND	DIRECTOR	2S INI 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:** 



-30-2003