

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90187 024 ***150.00

DOCUMENT # F01000001115

1. Entity Name
EDWARD D. SULTAN CO., LTD.



Principal Place of Business
3049 UALENA STREET, 14TH FL
HONOLULU HI 96819-1942

Mailing Address
3049 UALENA STREET, 14TH FL
HONOLULU HI 96819-1942

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 99-0081236

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAY, TIM
7680 UNIVERSAL BLVD., STE 520
ORLANDO FL 32819

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SULTAN JR, EDWARD D 1039 WAIHOLO STREET HONOLULU HI	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, HAROLD E 7 HAZEL AVE LARKSPUR CA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SULTAN III, EDWARD D 1221 VICTORIA STREET HONOLULU HI	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BOOKATZ, STEVEN J 47-136 UKAKOKO PLACE KANEHOE HI	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLANAGAN, LINDA L 1164 NAMAHEALANI PLACE HONOLULU HI	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PRATER, LAWRENCE S 360 KUANALAU PLACE HONOLULU HI	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: *Lawrence S. Prater*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 24, 2003 8088337772
Date Daytime Phone #

CR2E034 (10/02)