2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F09502 **DOCUMENT #**

1. Entity Name

JOHN R. SUTTON, P.A.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90471 045 ***150.00

						THE THE				
Principal Place of Business 7721 S W 62ND AVENUE SOUTH MIAMI FL 33143			7721	g Address S W 62ND AVENUE H MIAMI FL 33143					and the second	BIGIS BIGIS SAAT
2. Principal P	Place of Busin	ASS	3 Mai	ling Address						
- Timoipari	acc or bosin	000	3. IVIAI	iing Address				101 01011 01011	4)4 4 4)
Suite, Apt.	#, etc.	- · · ·	Suit	e, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Stat	е		City	City & State			4. FEI Number 59-2050148 Applied For Not Applied For			
Zip		Country	Zip		Country		5. Certificate of Status Desired		8.75 Ad	Iditional
	6. Name	and Address of	Current Registere	Registered Agent			7. Name and Address of New Registered Agent			
						Name				
SUTTON, .					-	Street Address (P.O. Box Number is Not Acceptable)				
7721 S W					L.		(1.10. Dox Humber is Not Acceptable)			
S MIAMI F	L 33143				}					
			_			City		FL	Zip Cod	
8. The above the obligati	named entity ions of registe	submits this state red agent.	ement for the purpo	ose of changing its	registered (office or register	red agent, or both, in the State of Florid	a. I am fan	niliar with,	and accept
SIGNATURE _		printed name of registe	ered agent and title if appl	icable (NOTE	- Registered Ag	ent signature required	Tubos coincide (ca)	DATE		<u></u>
				MOTE	- riegisieiou Ag	en signature required	a when reinstating)	DAIE		
		FEE IS \$150. Fee will be \$5					9. Election Campaign Finance	cina	\$5 C	10 May Be
Make Check	Payable to	Florida Departi	ment of State				Trust Fund Contribution.			to Fees
10. OFFICERS AND DIRECTORS 11.							ADDITIONS (OLIANIOSO TO OFFICE	700 4410 0		
TITLE	DP	<u> </u>		☐ Delete	TITLE		ADDITIONS/CHANGES TO OFFICE			
	SUTTON, JO	OHN R		□ Delete	NAME			L	Change	☐ Addition
	7721 SW 62				STREET A	DDRESS				
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CITY-ST-ZIP	<u>':</u>				CITY-ST-Z					
I hereby ce	ertify that the in	nformation suppli	ed with this filing d	oes not qualify for t	the exempti	on stated in Sec	ction 119 07(3)(i) Florida Statutes, I furt	har aartifu i		

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:

2-20-83

365-667-448/ Daytime Phone #