## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F52254 1. Entity Name

DOROTHY BRAZEAU INTERIORS INC.

## FILED Feb 05, 2000 8:00 am Secretary of State

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Principal Place	e of Business	Mailing Address							
730 COCOPLUM CIR #1 PLANTATION FL 33324-0748		730 COCOPLUM CIR #1 PLANTATION FL 33324-3748		Ī					
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2. Principal Pi	ace of Business	3. Mailing Address		_					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE	N THIS SE	ACF	
Suite, Apt. #, sto.		· · · · · · · · · · · · · · · · · · ·							
City & State		City & State		<b>4.</b> F	El Number	59-2150244			plied For
Zip_	Country	Zip	Country	~ 5. (	Certificate of	Status Desired		8.75 Add	itional
	6. Name and Address of Current F	Registered Agent	Name	7. N	lame and Ad	idress of New Reg	stered Ag	ent	
BDA:	ZEAU, DOROTHY								
	COCOPLUM CIR #1		Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
Plan	ITATION FL 33324-0748								
			City				FL	Zip Code	3
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or reg	gistered ag	ent, or bath, i	in the State of Florid	a.	1	
SIGNATURE _	Danacati Vo	BOKOTHI BRAZI	A-0 tegistered Agent signature re				DATE		
	Signature, typed or printed hame of registered agent a	<u> </u>		equired when re	inistaurig)				
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00  After MAY 1, 2000 Fee will be \$550.00  Make Check Payable to Department of Si				on Campaign Finan Fund Contribution.	cing 🗆		May Be
11.	OFFICERS AND		12.		DITIONS/CH	ANGES TO OFFICE	RS AND D	DIRECTORS	3 IN 11
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NAME	BRAZEAU, DOROTHY		NAME						
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13. I hereby 0	ertify that the information supplied with on this report or supplemental report is	true and accurate and that my	ne exemption stated signature shall have	the same	। ।७.७४(३)(।), legal effect a	rioriua statutes. I fu s if made under oat	ntrier certii h: that I an	y mar me in n an officer	or director

indicated on initial point or supplemental report is true and accorded and that my signature stantillated the same legal effect as it made dried as it made dried to differ or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.