## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

20 UN	FILED Apr 17, 2003 8:00 am Secretary of State														
DOCU  1. Entity Nam  B & H IN					Secretary of State 04-17-2003 90163 038 ***150.00										
Principal Plac 16301 SOUTH FORT MYERS US	TAMIÁMI TRA	16520 S #18-269	Mailing Address 16520 SOUTH TAMAMI TRAIL #18-269 FORT MYERS FL 33908 US												
2. Principal Place of Business 12141 CRYSTAL CONDO RD 12141 CRYSTAL						Compo Roma			C INDIVIDUAL PROPERTY.			IRI ASBIT DIN		<b>u</b> kuli <b>u</b> iahi 1001	
Suite, Apt.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES							
City & State FORT HYES, FORWA			City & State  FORT MYERS PL			LORIDA		4- FEI Number 59-2180969			Applied For Not Applicable				
SERIA SERIA		Country USA	Zip _	<del>                                     </del>		Country		5. Ceri	tificate of S	tatus Desir	ed		8.75 Ac	dditional	7
				7. Nan	ne and Add	iress of N	ew Regi	stered A	gent		╡.				
HOOVIS, BRUCE A 6941 LAKE DEVONWOOD DR FORT MYERS FL 33908						Name Street A	ddress (F	P.O. Box I	Number is	Not Accep	table)	<del> </del>			-
	_					City					<del></del>	FL	Zip Co	de	+
	named entity ions of registe	submits this statement f ered agent.	or the purpos	se of changing its	registere	d office or	r registere	ed agent,	or both, in	the State of	of Florida	. I am fa	miliar with	, and accept	7.
SIGNATURE .	Signature syped of	or printed name of registered agen	t and title if applica	able. (NO7	E: Registered	Agent signati	ure required v	when reinsta	iting)			DATE			
After	May 1, 200	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of	of State						9. Election Trust Fo	n Campaig und Contrit		ing _		00 May Be	1
10.		OFFICERS AND			11.		·	ADDIT	IONS/CHA	NGES TO	OFFICE	RS AND	DIBECTOR	3S IN 11	$\dashv$
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of the corp	on this report poration or the	information supplied with or supplemental report is receiver or trustee emp chment with an address,	s true and ac owered to ex	curate and that r ecute this report	ny signatu as require	ure shall ha	ave the sa	ame lega	l effect as i	f made un	der oath:	that I an	n an office	r or director	

**SIGNATURE:** 

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