FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Mar 19, 2003 8:00 am Secretary of State

DOCUMENT # F96000005686 1. Entity Name								03-19-2003 90119 035 ***150.00				
Resting S Ranch, Inc.												
DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address								90056516				
90 Bis	. Mailing Address	ing Address										
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State				City & State				4. FEI Number Applied For				
Pelham, AL 35124 Zip Country				Zip Country					-1116762 ertificate of Status Desired	\$	Not Applicable 8.75 Additional	
1982567575	חט א	OT WRIT	FE IN THIS	SPACE	23522E091	ı <u>.</u>	7.		e and Address of Current Re		ee Required	
		r in Cha. Establish	Name		. , , , , , , ,	and Address of Content to	-giatereu i	Agent				
							Street Address (P.O. Box Number is Not Acceptable)					
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	riveliğ	iğlar (2.0 - in v da iz				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												
	After May Amender	May 1 Fee is \$ 1, Fee is \$55i d UBR is \$61. o Florida Dep	0.00						Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS						inche 4	DIEMINA	Minter.	doalling stylendar capital thinest	ningsplagens	ere e partie	
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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 on a batternment of the an address with all colors like proposed.												

SIGNATURE: X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ith all other like empowered.

STF FL32381F.1

appears in Block 10 or on a