

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 28, 2003 8:00 am  
Secretary of State

02-28-2003 90121 018 \*\*\*150.00

DOCUMENT # F98000003068

1. Entity Name  
PHILLIP JAMES INDUSTRIES, INC.



Principal Place of Business  
#316  
501 N. ORLANDO AVE. #313  
WINTER PARK FL 32789

Mailing Address  
501 NORTH ORLANDO AVENUE  
STE 316  
WINTER PARK FL 32789



2. Principal Place of Business  
127 West Fairbanks  
Suite, Apt. #, etc. 440

3. Mailing Address  
127 West Fairbanks AVE  
Suite, Apt. #, etc. 440

CHECK HERE IF MAKING CHANGES

City & State  
Winter Park FL

City & State  
Winter Park FL

4. FEI Number 59-3506192  
Applied For  
 Not Applicable

ZIP 32789 Country USA

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

6. Name and Address of Current Registered Agent

VENTER, ROBERT  
#316  
501 N. ORLANDO AVE., #313  
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name VENTER, ROBERT  
Street Address (P.O. Box Number is Not Acceptable)  
127 W. Fairbanks AVE  
# 451  
City Winter Park FL 32789

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 *Robert Venter*

2.25.03

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 Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCD	VENTER, ROBERT..	127 W FAIRBANKS ANEX	WINTER PARK FL 32789	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		127 W. Fairbanks AVE.	# 451	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		WINTER, PARK FL	32789	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 title empowered.

SIGNATURE: *Robert Venter*  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.25.03

Date

Daytime Phone #

CR2E034 (10/02)