

FILED

May 21, 2002 8:00 am
Secretary of State

05-21-2002 91140 013 ***158.75

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J47873

Entity Name

V. DOC, INC.

Principal Place of Business

421 OVERSEAS HWY.
KEY LARGO FL 33037

Mailing Address

102421 OVERSEAS HWY.
KEY LARGO FL 33037

Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2773685

Applied For

Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLEMING, STEVEN
102421 OVERSEAS HWY.
KEY LARGO FL 33037

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

NATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
☐ Delete PD FLEMING, STEVEN 102421 OVERSEAS HIGHWAY KEY LARGO FL 33037		☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
☐ Delete		☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-02 (305) 451-1525

Date

Signature Please

CP2E034 (9/01)