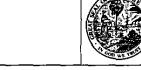
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

J60422 **DOCUMENT #** 1. Entity Name

SOUTHERN VAULT COMPANY



May 01, 2003 8:00 am Secretary of State

05-01-2003 90777 022 ***150.00

> 4.

Principal Place	of Business		Mailin	ng Address								
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2. Principal Place of Business			3. Ma	3. Mailing Address				n (mæissa mefe ornit mæssi frånn flære liði m		41611 61817 61	OCI OFBIF CONT	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				-	☐ CHECK HERE IF MAKING CHANGES				
			 				 -	<u> </u>				
City & State			City & State				4. [4. FEI Number 59-1718978			plied For	
			Zip Country							Applicable		
Zip	Country							8.75 Additional ee Required				
	C Name a	nd Address of Current	Booleton	ad A sont		, 	7 8	Name and Address of New Registe			'	
	6. Name a	nd Address of Current	Hegister	ed Agent		Name	- 7, F	Name and Address of New Registe	eu Age			
DIOLLARD						144						
RICHARD,						Street Addres	ss (P.O. B	Box Number is Not Acceptable)				
527 N.W. 9												
GAINESVIL	LE FL 3260	7				}					•	
						City			FL	Zip Code	,	
	·					l			(·		
			or the purp	oose of changing its	register	ed office or regi	stered ag	ent, or both, in the State of Florida. I	am fam	iliar with, a	and accept	
the obligatio	ons of registe	red agent.										
SIGNATURE _	`									_		
S	ignature, typed or	printed name of registered agen	and title if app	plicable. (NOTE	: Registere	d Agent signature req	uired when re	einstating) Da	ATE			
· EII	E NOWIII	FEE IS \$150.00		1								
1		Fee will be \$550.00		•				9. Election Campaign Financing		\$5.0	May Be	
		Florida Department o						Trust Fund Contribution.		Added	to Fees	
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.