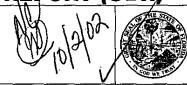
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

J64549 **DOCUMENT #**

L J PAYNE CORP.

1. Entity Name



FILED May 01, 2003 8:00 am Secretary of State 05-01-2003 90411 022 ***150.00

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Principal Place of Busin 9232 DENTON AVENUE HUDSON FL 34667	ess .	Mailing Address 9232 DENTON AVENUE HUDSON FL 34667							
2 Principal Place of Pu	ucinano	3. Mailing Address		 .				1011 B1011 (B01	
9232 Denton Ave. 9232 Denton Ave.			-						
Suite, Apt. #, etc. Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & State	3T	City & State			4. FEI Number 59-2795257			pplied For	
Hudson, F	Country	Hudson, FL	Country		 			ot Applicable	
34667	USA	34667	. Country USA	5.	Certificate of Status Desired		8.75 Add		
	me and Address of Current R				Name and Address of New Re				
			Name						
Payne, Leslie J.				PAYNE, LESLIE J. Street Address (P.O. Box Number is Not Acceptable)					
8014 ISLAND DRIV	E			32 DENTO)		ì	
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PORT RICHEY FL 3	34668		City				Zin Con		
			City	HUDSON	ī,	FL	Zip Cod	4667	
	•	the purpose of changing its re	egistered office or	registered ag	gent, or both, in the State of Flo	rida. I am far			
the obligations of re	sistered agent.					, I		Ĭ	
SIGNATURE 2	shi Paz	_				4/25/	٥3		
Signature, ty	ped or printed name of registered agent an	d title it applicable. (NOTE: F	Registered Agent signat	ure required when r	einstating)	DATE			
FILE NOV	V!!! 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 \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND D	IRECTORS	11.	ΑC	DDITIONS/CHANGES TO OFFI	CERS AND E	IRECTOR	S IN 11	
TITLE PVTS	7 3	☐ Delete	TITLE	PVTS			Change	☐ Addition	
	LESLIE J		NAME	PAYNE,	LESLIE J				
	AND DRIVE		STREET ADDRESS	9232 D	ENTON AVE.			} ·	
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STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
	the information supplied with the	his filing does not qualify for th	■	ed in Section	119 07/3)(i) Florido Statutos I	further cortif	that the i	nformation	
indicated on this re	the information supplied with the control of the co	rue and accurate and that my	signature shall h	ave the same	legal effect as if made under o	ath: that I am	an officer	or director	

of the corporation or the receiver or thistee 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 efter like empowered.

SIGNATURE: