

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

FILED

03 MAY 28 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J70091

1. Entity Name

NEW YEAR INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1717 Gulf Shore Blvd North

3. Mailing Address

P.O. BOX, 7435

Suite, Apt. #, etc.

804

Suite, Apt. #, etc.

City & State

NAPLES, FLORIDA

City & State

NAPLES, FLORIDA

Zip

34102

Country

USA

Zip

34101

Country

USA

4. FEI Number

59-2808922

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name LANNEE GASTON

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

1717 Gulf Shore Blvd North

City Naples, Florida

FL

Zip Code 34102

DO NOT WRITE IN THIS SPACE

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

Lannee Gaston

Lannee Gaston P/S/D

05/26/2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S/D LANNEE GASTON 1717 Gulf Shore Blvd North, Naples, FL, 34102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T/D LANNEE JULIETTE 1717 Gulf Shore Blvd North, Naples, FL, 34102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 an attachment with an address, with all other like empowered.

SIGNATURE:

Lannee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P/S/D G. LANNEE

05/26/03

Date

239 649 43 65

Daytime Phone #

CR2E0348 (12/02)

5/26