## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## J99339 **DOCUMENT #**

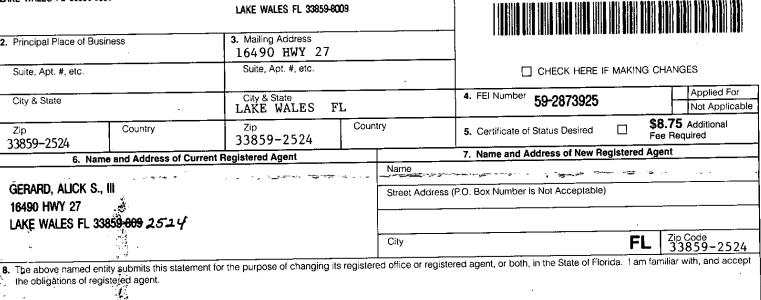
1. Entity Name



## FILED Feb 27, 2003 8:00 am Secretary of State

02-27-2003 90168 018 \*\*\*150.00

THE KICKER SHOP, INC.		
Principal Place of Business 16490 HWY 27 LAKE WALES FL 33859-8009	Mailing Address 16490 HWY 27 	
2. Principal Place of Business	3. Mailing Address 16490 HWY 27	i familia den galla enema e
Suite, Apt. #, etc.	Suite, Apt. #, etc.	 ☐ CHECK H



SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
FI After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State	e fo		Election Campaign Financ     Trust Fund Contribution.	Added Added	<b>0</b> May Be to Fees			
10.	OFFICERS AND DIRECTOR	S	11,	ADDITIONS/CHANGES TO OFFICE					
TITLE	PD GERARD, ALICK S., III 16490 HWY 27 LAKE WALES FL 33859 <del>-8009</del> みちみく	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	25.7	Change	Addition			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D GERARD, DONNA M 16490 HWY 27 LAKE WALES FL 33859-8009- 2524	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition			
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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 attachm

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP