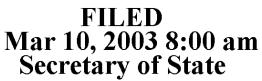
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)



1. Entity Na	UNENT ame HOLDINGS		/61					03-10-200	-	DI St 18 ***150	
Principal Place of Business P.O. BOX 2496 SARASOTA FL 34230			46 N	Mailing Address 46 N. WASHINGTON BLVD #1 SARASOTA FL 34236				. ,			
2. Principal	l Place of Busine	ss	3. Ma	iling Address	·						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State			4.	4. FEI Number 65-0010436 Applied For				
Zip	Zip Country		Zip	Zip Coun		ту	5. (Certificate of Status Desire		\$8.75 A	Not Applicab dditional
	6. Name a	nd Address of Cur	rent Register	ed Agent			7. 1	Name and Address of Ne	w Penietoro	Fee Requir	ed
46 N. WA	SON, JOHN ASHINGTON B TA FL 34236	LVD., #1	- The state of the		nev _ f	Name Street Addres		ox Number is Not Accept			·
•					-	City	<u>.</u>		F	Zip Co	
SIGNATURE.	Signature, typed or FILE NOW!!! er May 1, 2003	orinted name of registered of FEE IS \$150.00 Fee will be \$550. lorida Departmer	agent and title if app			Agent signature requi		ent, or both, in the State o instating) 9. Election Campaign Trust Fund Contribu	DATE	\$5.6	OO May Be
10.	•		ND DIRECTO	RS .	11,			NITION OF STREET			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOLEY, JAY 1330 MAIN S SARASOTA I	D. ST		☐ Delete	TITLE NAME	ADDRESS I-ZIP	ADI	DITIONS/CHANGES TO C	DFFICERS AN	D DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A	ADDRESS - ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS -		×	•	☐ Delete	TITLE NAME - STREET A	ADDRESS	·	-		Change	☐ Addition
JIIY-ST-ZIP				☐ Delete	TITLE					☐ Change	Addition
TITLE NAME STREET ADDRESS				LJ Delete	NAME STREET A CITY-ST-						
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE JAME STREET ADDRESS CITY-ST-ZIP		- %		□ Delete .	STREET A	DDRESS	****		<u>.</u>	☐ Change	☐ Addition

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

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(941)365-5656

CR2E034 (10/02)