## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## K43732 **DOCUMENT #**

1. Entity Name

YORKSHIRE INVESTMENTS CORP.

VE TO

## **FILED** Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90226 006 \*\*\*150.00

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Principal Place of Business 2900 UNIVERSITY DR STE 68 CORAL SPRINGS FL 33065			2900 STE	Mailing Address 2900 UNIVERSITY DR STE 68 CORAL SPRINGS FL 33065				A MANGALIA ANA ARRADA ARRAY NAMBA NAMBA	I DJ. DJ. DJ. DY. DY. DY. DY. DY. DY. DY. DY. DY. DY	EN BION O	<b>i i i i i i i</b> i i i i i i i i i i i i	
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Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
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Zip Country		Zip	Zip Cour		/	5. (	Certificate of Status Desired		. <b>75</b> Add Require		7	
	6. Name	and Address of Current	Register	ed Agent			- 1	Name and Address of New Reg				┥
						Name						7
	STEPHEN			Street Address			ss (P.O. B	(P.O. Box Number is Not Acceptable)				
	versity dr	IVE		3,331,700,000								↲
SUITE 68	DDINGO EL											1
CORAL SI	PRINGS FL	33065				City			FL	Zip Cod	e	]
8. The above the obliga	e named entity tions of regist	submits this statement for several services agent.	or the purp	pose of changing its re	egistered	office or regis	stered ago	ent, or both, in the State of Florid	la. I am famil	iar with,	and accept	1
SIGNATURE												
	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE:	Registered A	gent signature requ	uired when re	instating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of								Election Campaign Finan     Trust Fund Contribution.	cing		O May Be to Fees	
10.	OFFICERS AND DIRECTORS				11.		ΔD	DITIONS/CHANGES TO OFFICE	DC AND DID	FCTOR	NIN 11	4
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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. SIGNATURE: