## **2003 FOR PROFIT CORPORATION**

## UNIFORM BUSINESS REPORT (UBR) K55661

**DOCUMENT #** 

1. Entity Name



FILED
Mar 12, 2003 8:00 am
Secretary of State
03-12-2003 90107 045 \*\*\*150.00

DENNIS E. E	BRITT, INC.					150.00	
Principal Place of Business 8890 S.W. 106TH STREET MIAMI FL 33176		Mailing Address 8890 S.W. 106TH STREET MIAMI FL 33176					
2. Principal Place of Business		3. Mailing Addr	ess			## ###### BER## <b>614</b> 61 BI####################################	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State	City & State		4. FEI Number 65-0093711 Applied		
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired	Not Applicable  8.75 Additional	
6	Name and Address of Cu	rrent Registered Agent			7. Name and Address of New Registered A	ee Required	
BRITT, DENNIS	•	•		Name -		9014	
8890 S.W. 106			Street Address		s (P.O. Box Number is Not Acceptable)		
MIAMI FL 3317	О						
	<u>.                                    </u>		}	City	FL	Zip Code	
8. The above name the obligations of	ed entity submits this statement of registered agent.	ent for the purpose of cha	anging its registere	ed office or registered	d agent, or both, in the State of Florida. I am fa	miliar with, and accept	
SIGNATURE Signate	ure, typed or printed name of registered	agent and title if applicable.	(NOTE: Registered	Agent signature required w	when reinstating) DATE		
💪 After May	NOW!!! FEE IS \$150.00 1, 2003 Fee will be \$550 able to Florida Departme	0.00			9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	

Make	FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Check Payable to Florida Department of State
10.	OFFICERS AND DIRECTO

OFFICERS AND DIRECTORS

TITLE D		I I B-1-4-				
STREET ADDRESS 86	BRITT, DENNIS EDWIN 1890 SW 106 ST (REAR) MAMI FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chánge	☐ Addition
STREET ADDRESS 88	RITT, ROSAMARIA F. 890 SW 106 ST (REAR) IIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP	م من کو بھٹری میٹر اور اور ایک میٹری دی در کا	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· ·	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ify that the information supplied with this filing	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition

Interest 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

EDENNIS E. BRIH 3-6-03 305.270-1529