2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K81810 1. Entity Name ARTA BINTANG, INC.							Secretary of State 02-17-2002 90077 033 ***150.00				
Principal Place of Business 11250 OLD ST. AUGUSTINE RD #24 JACKSONVILLE FL 32257 Mailing Address 8629 LEM TURNER RD JACKSONVILLE FL 32208					•					(1915 (1516 155)	
2. Principal f	Place of Busine	SS	3. Mailing Address							#011 6 #011 1001	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4.	4. FEI Number 59-2948759 Applied For Not Applicable				
Zip Country			Zip	Zip Country		5.	5. Certificate of Status Desired				
	6. Name a	nd Address of Current R	egistered Agent			7.	Name and Address of New Re				
					Name						
GUPTON, C J 8823 LEM TURNER					Street Address (P.O. Box Number is Not Acceptable)						
JACKSON	WILLE FL 322						,				
					City		FL Zip Code				
Tax filing requirement and elects to do so After I				FILE NOW!!! FEE IS \$150.00 ter May 1, 2002 Fee will be \$550.00 Check Payable to Department of Stat			10. Election Campaign Financing \$5.00 May Be				
11.		OFFICERS AND D	IRECTORS	12.		Αſ	DDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 11 .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		s. Ebridge drive Ark FL 32065	☐ Delete		į į] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Prentice Ebridge Drive NRK FL 32065	☐ Delete] Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition	
of the cor	poration or the	ir supplemental report is tr receiver or trustee empow	ue and accurate and that my	/ sionati	ure shall ha	ve the same.	119.07(3)(i), Florida Statutes. I fi legal effect as if made under oa ida Statutes; and that my name a	th-that Iam a	in officer i	or director	

SIGNATURE:

SUPPLEMON TO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/82 (904)292-912,