2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **K84575**

1. Entity Name

VERO THEATRE BUILDING, INC.



FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 91012 023 ***150.00

Principal Place of Business. C/O ROBERT L BRACKETT VERO BEACH FL 32980 2. Principal Place of Business Suite, Apt. #, etc. 3. Mailing Address City & State City
C/O ROBERT L BRACKETT 2068 14TH AVENUE VERO BEACH FL 32980 2. Principal Pface of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country S. Certificate of Status Desired Sea Required For Required For Required For Required For Required For Required City Street Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of the obligations of registered agent. Signature. Special very public to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE BACKETT, ROBERT L. Signature. Special very public to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE BACKETT, ROBERT L. Signature. Special very public to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE BACKETT, ROBERT L. Signature. Special very public to Florida Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE BACKETT, ROBERT L. Signature. Special very public to Florida Department of State 12. OFFICERS AND DIRECTORS SIGNATURE Signature. Special very public to Florida Department of State 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE BACKETT, ROBERT L. Signature. Special very public to Florida Department of State 14. FEI Number Scription of Sea Vision o
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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 good is true and accurate and that my signature shall have the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal of the same legal effect as if made under eath that legal effect eath that legal eff

indicated on this report or supplemental report is trule 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/03 772 567-4303