7/30/

2002 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 17, 2002 8:00 am

DOCUN	MENT:	# L000000	002337	7			1		,			ry ot 0381 024		
1. Entity Name	•		-					•		07 50	2002)	0301 021	50.00	
Principal Place of Business 1921 NW 8TH PLACE DCALA FL 34475			Mailing Address -2021 NW 6711 PLAGE OCALA FL 34475 OCALA FL 34475			50 NW 123° Canopy, F.C		Ct BUI	7				99555	
2. Principal Pla	ace of Busin	ess	3. Mailing	Address	 -									
Suite, Apt.	#, etc.		Suite, A	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE # 59-36,21511						
City & State)		City & S	City & State				4. FEI Number APPLIED FOR			Applied For Not Applicable			
Zip	 -	Country	Zip		Count	itry			cate of Status		<u>.</u>	\$5.00 Add Fee Require		
	6. Name	and Address of Curre	nt Flegisterad A	goni		Name		7Name	and Attorney	of Now Re	gistered	Agent		
KARP	AN, JULIE					Street A	ddress (P.	O. Box Nu	mber is Not A	cceptable)	<u> </u>			
) Northw Nopy FL 3	EST 123RD COURT						•		<u> </u>		<u> </u>		ļ
MICA	MOP1 PL 3	2007										Zip Cod		l
		y submits this statement		_	,	City			· .		FL			ļ
	c. P. S.	ered agent.			-	· •	. **-					KIRLWINE A	**************************************	
SIGNATURE -	c. P. S.	ered agent.	ent and title if applicab	FILE I	NOW!!! Payable t	FEE IS \$	50.00 ment of	hen reinstating) (y som skaldete se medle a ^{MA}		
SIGNATURE -	c. P. S.	ered agent.	ent and little if applicab	FILE I ake Check f	NOW!!! Payable t	FEE IS \$ o Depart mber 25,	50.00 ment of	hen reinstating)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	S Commence of the state of the		5
SIGNATURE - SUPPLIED STATE SUPPLIED STATE SUPPLIED STATE SUPPLIED S	MGRM HOLLY, JI 19350 NO	or printed name of registered accommod MANAGING MEM	and inte if applicable Ma	FILE I ake Check f	Payable to By Septe	FEE IS \$ to Depart mber 25,	50.00 ment of	hen reinstating)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	[] Carefu		12E083 (4/02)
SIGNATURE - SUBJECTION 2D SUBJECTION SUBJECTION SUBJECTION SUBJECTION SUBJECTION SUBJECTION SUBJECTION NAME	Signatura, typed MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN.	MANAGING MEM PRTHWEST 123RD CO Y FL 32667	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE I ake Check F	NOW !!! I Payable t By Septe 10. 1inu NAM STRE NAM STRE	FEE IS \$ to Depart mber 25, E AE EET ADDRESS 7-ST-ZIP E AE EET ADDRESS	50.00 ment of	hen reinstating)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	S Commence of the state of the		CROE083 (4/02)
SIGNATURE - SUPPLIED S	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO	MANAGING MEM ERRY RTHWEST 123RD CO Y FL 32667	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE I ake Check I	NOW !!! I Payable t By Septe 10. 1iiii NAM STRE CITY CITY	FEE IS \$ to Depart mber 25, E E EET ADDRESS r-ST-ZIP E EET ADDRESS y-ST-ZIP	50.00 ment of	hen reinstating)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	(T) Cuttings S Change	☐ Addition	CR2E083 (4/02)
SIGNATURE - SUBSTITUTE SUBSTITUTE SUBSTITUTE SUBSTITUTE SUBSTITUTE SUBSTITUTE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO	MANAGING MEM PRINWEST 123RD CO PULIE PRINWEST 123RD CO	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE I ake Check I The Due I ERS Deleta	NOW !!! ! Payable t By Septe 10. 11TL NAM STRE CITY IITL NAM STRE CITY IITL STRI	FEE IS \$ to Depart mber 25, E AE EET ADDRESS (- ST-ZIP E AE EET ADDRESS 4-ST-ZIP E EET ADDRESS EET ADDRESS	50.00 ment of	hen reinstating)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	(T) Cuttings S Change	Addition Addition	CROEORS (4/02)
SIGNATURE - SUB-CLICAN 2D-CLICAN 2D-CLICAN 3D-CLICAN 3D-	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO	MANAGING MEM PRINWEST 123RD CO PULIE PRINWEST 123RD CO	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE ake Check Due t FRS Delete Delete	NOW !!! I Payable t By Septe 10. 11111 NAM STRE CITY 11111 NAM STRE CITY 11111 NAM STRE CITY	FEE IS \$ to Depart mber 25, E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP	50.00 ment of	State)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	(T) Cuttings S Change	Addition Addition	CR2E083 (4/02)
SIGNATURE - SUPPLICATION SUPPLICATION SUPPLICATION SUPPLICATION STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO	MANAGING MEM PRINCEST 123RD CO Y FL 32667 JULIE PRINCEST 123RD CO Y FL 32667	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE I ake Check I	NOW !!! Payable t By Septe 10. 11/11 NAM STRE CITY TITL STRI CITY TITL NAM STRI STRI CITY TITL NAM STRI STRI CITY	FEE IS \$ to Depart mber 25, E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE AE EET ADDRESS AE EET ADDRESS AE EET ADDRESS AE	50.00 ment of	State)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	Change	Addition Addition Addition	CROENRA (4/02)
SIGNATURE - SUBJECTION 20- SECTION 30- SECTION 30- SECTION STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO	MANAGING MEM ERRY PRTHWEST 123RD CO Y FL 32667 JULIE PRTHWEST 123RD CO Y FL 32667	Manager and title if applicable Manager and title if applicable Manager and title if applicable in the manager and title in the manager	FILE ake Check Due t FRS Delete Delete	NOW !!! Payable t By Septe 10. 11/11 NAM STRE CITY TITL STRI CITY TITL NAM STRI STRI CITY TITL NAM STRI STRI CITY	FEE IS \$ to Depart tember 25, E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE AE AE AE AE AE AE AE AE	50.00 ment of	State)\(\(\frac{1}{2}\) = \(\frac{1}{2}\)		DATE	Change	Addition Addition Addition	CR2EAR3 (4/02)
SIGNATURE - SUBJECTION 2D STANDARD 2D STANDARD 2D STANDARD 2D STANDARD 3D STANDARD STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO MICANOP	MANAGING MEM MANAGING MEM PRINCEST 123RD CO Y FL 32667 JULIE PRINCEST 123RD CO Y FL 32667	MANUEL MA	FILE ake Check Due to the ch	NOW III I Payable t By Septe 10. TITLI NAM STRE CITY TITLI NAM STRI STRI CITY	FEE IS \$ to Department 25, E AE AE AE AE AE AE AE AE AE	50.00 ment of	State	AI		DATE	Change Change Change	Addition Addition Addition	CBOENES (4/05)
SIGNATURE - SUA CLICIA SUA SUA SUA SUA SUA SUA SUA SUA SUA SU	MGRM HOLLY, JI 19350 NO MICANOP MGRM KARPAN, 19350 NO MICANOP	MANAGING MEM ERRY PITHWEST 123RD CO Y FL 32667 JULIE PRTHWEST 123RD CO Y FL 32667	MANUAL PROPERTY OURT	FILE ake Check Due to the ch	NOW III Payable to By September 10. TITLE NAME STREET CITY TITLE	FEE IS \$ to Depart triber 25, E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP LE AE LEET ADDRESS Y-ST-ZIP LE LE AE LEET ADDRESS Y-ST-ZIP LE LE LEET ADDRESS Y-ST-ZIP LE LE LEET ADDRESS	50.00 ment of	State State	AI	DDITIONS/	DATE	Change Change Change	Addition Addition Addition Addition	CROFINES (4002)