

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

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90369 032 ***150.00

DOCUMENT # **L20201**

1. Entity Name
CHRISTINE ENTERPRISES, INC.



DO NOT WRITE IN THIS SPACE

44042219

2. Principal Place of Business
1825 CLEVELAND ST

3. Mailing Address
P.O. Box 22-0172

Suite, Apt. #, etc.
#12

Suite, Apt. #, etc.

City & State
Hollywood, FL

City & State
Hollywood, FL

4. FEI Number
05-0147774

Applied For
Not Applicable

Zip
33020

Country
U.S.A.

Zip
33022

Country
U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CHRISTINE K. GORTH

Street Address (P.O. Box Number is Not Acceptable)
1825 CLEVELAND ST #12

City
Hollywood

FL

Zip Code
33020

8. 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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTINE K. GORTH 1825 CLEVELAND ST #12 Hollywood, FL. 33020
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Christine K. Gorth. CHRISTINE K. GORTH** **4/28/04** **954 926-7610**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)