2003. FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L2/

LUV ENTERPRISES, INC.

1. Entity Name

FILED Mar 06, 2003 8:00 am Secretary of State

03-06-2003 90105 011 ***150.00

DO NOT WRITE IN THIS SPACE				70025641	
2. Principal Place of Business		3. Mailing Address			
3220 NE 24th Street		Same			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State Ocala, Florida		City & State		4. FEI Number Applied For 59–2966560 Not Applicable	
^{Zip} 3447 0	Country USA	Zip -	Country	5. Certificate of Status Desired	
				7. Name and Address of Current Registered Agent	
DO NOT WRITE			Name ADRIAN LUCAS Street Address (P.O. Box Number is Not Acceptable) 3220 NE 24TH STREET		
	ı	,	City	OCALA FL Zip Code 34470	
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After May 1, Fee is \$150.00 After May 1, Fee is \$550.00 After May 1, Fee is \$550.00 Trust Fund Contribution.					
(See criter	ia on back)	Make Check Payable			
11.	, OFFICERS AND D	IRECTORS			
TITLE NAME	PRESIDENT		TITLE NAME		
STREET ADDRESS	ADRIAN LÚCAS		STREET ADDRESS		
CITY-ST-ZIP	3220 NE Z4TH STREET		CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OCALA, FL 34470 VICE PRESIDENT JEFF VANLUE 3220 NE 24TH STREET		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE	OCALA, FL 34470		TITLE		
NAME	_SECRETARY	The second secon	-NAME:	و بين بيدون المستخدم و المستخدم المنه و أن المستشوط الله المستشوط المستدون المستدون المستدون المستندون الم	
STREET ADDRESS CITY-ST-ZIP	BRIAN LUCAS 3220 NE 24TH STREET		STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OCALA, FL 34470 TREASURER JOHN O'HARA 3220 NE 24TH STREET		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE	OCALA, FL 34470		TITLE -		
NAME:			NAME	·	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	2	
TITLE	• • • • • • • • • • • • • • • • • • •		TITLE	·	
NAME	•		NAME		
STREET ADDRESS	•		STREET ADDRESS	·	
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

CSIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

800-780-8204

Daytime Phone #

Affachment 70025641 MJC # L21672 MICHAEL J. COOPER

32 N.W. 3RD AVENUE • OCALA, FLORIDA 34475 • TELEPHONE 352-732-4500 • FAX 352-351-385

March 5, 2003

Corporate Records Bureau Division of Corporations Department of State

ATTENTION: Annual Reports Section

Post Office Box 6327

Tallahassee, Florida 32314-

RE: Luv Enterprises, Inc.

Dear Sirs:,

Please find enclosed the 2003 For Profit Corporation Uniform Business Report for the above referenced corporation, together with the filing fee of \$150.00.

Please process same at your earliest convenience.

Sincerely yours,

Michael J. Cooper

MJC/slw(

Enclosures

xci Luv Enterprises, Inc. Attn: Adrian Lucas