

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90104 047 ***158.75

0398605 AV

DOCUMENT # L78738

1. Entity Name
FAIR DINKUM HOLDING CORP.



Principal Place of Business
620 NW 35TH STREET
BOCA RATON FL 33431
US

Mailing Address
620 NW 35TH STREET
BOCA RATON FL 33431
US



2. Principal Place of Business
701 PARK OF COMMERCE BLVD

3. Mailing Address
701 PARK OF COMMERCE BLVD

Suite, Apt. #, etc.
SUITE 100

Suite, Apt. #, etc.
SUITE 100

City & State
BOCA RATON FL

City & State
BOCA RATON FL

4. FEI Number **11-3017804**

Applied For
Not Applicable

Zip
33487

Country
USA

Zip
33487

Country
USA

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GROGAN, LAWRENCE E
620 NW 35TH STREET
BOCA RATON FL 33431

Name **DAVID G. FESSLER**

Street Address (P.O. Box Number is Not Acceptable)

701 PARK OF COMMERCE BLVD, STE 100

City **BOCA RATON**

FL Zip Code **33487**

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 **DAVID G. FESSLER** Jan 10, 2003
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **FESSLER, ROBERT, F**
STREET ADDRESS **620 NW 35TH STREET**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **P** ☒ Change ☐ Addition
NAME **FESSLER, ROBERT G**
STREET ADDRESS **701 PARK OF COMMERCE BLVD, STE 100**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ROBERT G. FESSLER** Jan 10, 2003 (561) 998 4744

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)