2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) M20318 **DOCUMENT #** 1. Entity Name



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90348 018 ***150.00

| JULIÚS S | SER, P.A. | | | 01-13-2003 90348 0 | 18 ***130.00 | |
|---|--|--|--|---|---|--|
| Principal Place of Business 4606 PRAIRIE AVE MIAMI BEACH FL 33140 | | Mailing Address 4606 PRAIRIE AVE MIAMI BEACH FL 33140 | <u> </u> | | INJA NINGIA NINGI NINGI NINGI NINGI | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | ☐ CHECK HERE IF MAKING | CHANGES | |
| City & State | | City & State | | 4. FEI Number 59-2572857 | Applied For | |
| Zip | Country | Zip | Country | E Cortificate of Status Desired | Not Applicable \$8.75 Additional Fee Required | |
| | 6. Name and Address of Currer | nt Registered Agent | | 7. Name and Address of New Registered | | |
| OED HIL | | | Name | ده المستعبد الرابي الروايوني المستقل ما يوليد ل اليسال «الرسمان» . - • | ا د المسلم الله الله الله المسلم الرائي الرواهيين المسلم به المسلم المسلم المسلم المسلم المسلم المسلم المسلم ا الم | |
| SER, JUL 4606 PRA | | Street Address | | (P.O. Box Number is Not Acceptable) | | |
| MIAMI BE | ACH FL 33140 | | | | | |
| | | | City | FL | Zip Code | |
| 8. The above | e named entity submits this statement | for the purpose of changing its | s registered office or regis | tered agent, or both, in the State of Florida. I am t | amiliar with, and accept | |
| the obliga | tions of registered agent. | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | int and title if applicable (NOT | FE: Registered Agent signature requ | ired when reinstating) DATE | | |
| <u>i</u> | | in and the suppleade. (NOT | re. negisiered Agent signature requ | DATE DATE | | |
| Afte | FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department | | | 9. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AN | D DIRECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTORS IN 11 | |
| TITLE | DPST | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME STREET ADDRESS | SER, JULIUS 4606 PRAIRIE AVE | | NAME STREET ADDRESS | | | |
| CITY-ST-ZIP | MIAMI BEACH FL 33140 | | CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | Change Addition | |
| NAME | | | NAME OTSET ADDRESS | | | |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | | | NAME . | | | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | |
| TITLE Name | | ☐ Delete | TITLE NAME | | ☐ Change ☐ Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | ı | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | | | NAME | | | |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | | ☐ Delete | NAME | | ☐ Audition | |
| STREET ADDRESS | | | STREET ADDRESS | | | |
| CITY-ST-ZIP | · · | | CITY-ST-ZIP | | | |
| 12. I hereby of indicated | certify that the information supplied with on this report or supplemental report | th this filing does not qualify for is true and accurate and that n | r the exemption stated in S ny signature shall have the | Section 119.07(3)(i), Florida Statutes. I further cert e same legal effect as if made under oath; that I a | ify that the information man officer or director | |

empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or changed, or on an attachment with address, with all other like empowered.

SIGNATURE:

PINGUINE SIGNATURE ANDITYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR