## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

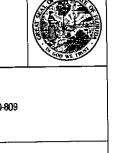
Mailing Address

## M74748 **DOCUMENT #**

1. Entity Name

Principal Place of Business

INDIGO INTERNATIONAL INC.



## **FILED** Feb 12, 2003 8:00 am Secretary of State 02-12-2003 90105 012 \*\*\*158.75

149-C S RIDGEWOOD AVE DAYTONA BEACH FL 32114 US			P O BOX 10809 DAYTONA BEACH FL 32120-809 US									
2. Principal Place of Business			3. Mailing Address				_					
Suite, Apt. #	, etc.		Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State				<b>4</b> . F	FEI Number 59-1777233 Applied For Not Applicable				
Zip Country		Zip		Country		5. (	Certificate of Status Desired		8.75 Addit ee Required			
	and Address of Current	d Agent				7. Name and Address of New Registered Agent						
						Name						
APGAR, ROBERT F						Street Address (P.O. Box Number is Not Ac						
149-C SOUTH RIDGEWOOD AVENUE												
DAYTONA BEACH FL 32114					City			FL	Zip Code			
							torod an	ent, or both, in the State of Flor	ida. I am fa	<u> </u>	ind accept	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of \$				State				Election Campaign Final     Trust Fund Contribution	i. 🔲	Added	May Be to Fees	
10. OFFICERS AND DIRECTORS							AC	DDITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Robert F. Cdonald Avenue		□ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MCMUNN 3 SO. RA	I, WILLIAM H. VENSFIELD LANE ) BEACH FL		☐ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CRISP, L 217 SEM		- ·	Delete	STI	LE ME REET ADDRESS Y-ST-ZIP		•		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MOOTHA 3 BROAD	RT, GARY DWATER DR DBCH FL 32174	-11	☐ Delete	NA St	LE ME REET ADDRESS IY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TEETERS 10 BROA	BRUCE W DRIVER RD DEACH FL 32174		☐ Delete	NA ST	LE ME REET ADDRESS IY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP			4-n	☐ Delete	NA ST CI	ile Ime Reet address Ty-St-Zip			473	Change	Addition	
12. I hereby of indicated	on this rep	ne information supplied wort or supplemental reporting receiver outrustee entachment with an address	nowered t	o execute this repor	t as red	kemption stated nature shall have uired by Chapte	in Section the same r 607, Flo	n 119.07(3)(i), Florida Statutes, e legal effect as if made under rida Statutes; and that my nam	I further cer oath; that I a e appears ir	tify that the ii im an officer i Block 10 or	nformation or director Block 11 if	

**SIGNATURE:** 

Secretary

(386) 255-7558

Daytime Phone #