

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90310 007 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #M92913

1. Entity Name
GR8 PARTY I, INC.

Principal Place of Business
**C/O HARRIET RUBIN
P.O. BOX 940852
MAITLAND, FL 32794**

Mailing Address
**C/O HARRIET RUBIN
P.O. BOX 940852
MAITLAND, FL 32794**

90154994

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2907114

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUBIN, HARRIET
1611 HURON TR.
MAITLAND, FL 32751**

Name

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

City

FL

Zip Code

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 submitting)

DATE

MAITLAND, FL 32751
MAITLAND, FL 32751

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PST
RUBIN, HARRIET
1611 HURON TRAIL
MAITLAND, FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 507, 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:

Harriet Rubin

9/4/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Devised Phone #

CPREC034 (1/01/02)

Attachment

90154994
M92913

GR8 PARTY! Inc.

by

Cookie Rubin

P.O. Box 940852 Maitland, Florida 32794-0852
PHONE 407-660-0019 FAX 407-629-4282

September 4, 2003

*Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314*

Attn: Annual Report Section

To Whom it may concern:

As per my telephone conversation this morning with one of your agents, enclosed please find a copy of my 2003 annual report with check number 6709, dated May 1, 2003 in payment of our annual return. This check has not been returned to my bank.

Per her instructions, enclosed is a new 2003 annual report with check # 28106 replacing the original report and the original check.

Thank you very much.

GR8 PARTY! Inc.

Harriet Rubin
Harriet Rubin