## **2002 UNIFORM BUSINESS REPORT (UBR)**

## FILED Jul 16, 2002 8:00 am Secretary of State M97755 DOCUMENT # 1. Entity Name 07-16-2002 90363 033 \*\*\*150.00 **GULFCOAST BUSINESS WORLD INC.** Principal Place of Business Mailing Address 21 RACE TRACK RD. NE C/O RICHARD D MOORE FT. WALTON BCH FL 32547 21 RACETRACK RD NE US FT WALTON BEACH FL 32547 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2915663 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOORE, RICHARD D. Street Address (P.O. Box Number is Not Acceptable) 4777 MEADOW LAKE DR CRESTVIEW FL 32536 City 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 reinstating) DATE FILE NOW!!! FEE IS \$550.00 9.º This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11.11 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE Change Addition MOORE, RICHARD D. NAME NAME 4777 MEADOW LAKE DR STREET ADDRESS STREET ADDRESS CRESTVIEW FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition

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 ental 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 trustee empower do to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information indicated on this report or suppler of the corporation or the received

STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

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Florida Department of State

The notice of payment due for the 2002 Uniform Business Report was received in our office for this first time last week.

In accordance with your instructions, we are remitting only the \$150.00 due for the renewal registration and deducting the late fee.

Thank you

Richard D. Moore

President