


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State

5/8

05-08-2003 90158 021 ****61.25

DOCUMENT # N02000003136	
1. Entity Name HOUSE OF ELIZABETH, INC.	

Principal Place of Business 614 N.W. 2ND STREET DELRAY BEACH FL 33444	Mailing Address 614 N.W. 2ND STREET DELRAY BEACH FL 33444
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number 05-1024054	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HUDSON, ELIZABETH 614 N.W. 2ND STREET DELRAY BEACH FL 33444

7. Name and Address of New Registered Agent
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 <i>Elizabeth Hudson</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
PD	MCALLISTER, VIRGILEE B 13840 77TH PLACE N WEST PALM BEACH FL 33412
VD	HUDSON, ELIZABETH 614 N.W. 2ND STREET DELRAY BEACH FL 33444
SD	GRAHAM, COREY B SR. 13840 77TH PLACE N WEST PALM BEACH FL 33412
D	KENNEDY, FREDDIE L 850 PALM BOULEVARD PAHOKEE FL 33476
D	LESTER, JAMES 1515 RAILROAD AVENUE #2 LAKE WORTH FL 33460
EXD	KAI, NIEMA 3108 S.E. 1ST PLACE BOYNTON BEACH FL 33435

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	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 617, 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: SIGNATURE REQUIRED <i>Elizabeth Hudson</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date <i>May-003</i> Date

CR2E037 (10/02)