

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

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90118 029 \*\*\*\*61.25

DOCUMENT # N39010 ✓  
1. Entity Name  
PEEK.AB.OO CHALLENGED ARTISTS  
INC.

**DO NOT WRITE IN THIS SPACE**

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

65-0176931

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Pamela K. Bauman

Street Address (P.O. Box Number is Not Acceptable)  
6901 ENVIRON BLVD APT 3-8

City LAUDERHILL FL Zip Code 33309

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE Pamela K Bauman  
Signature, typed or printed name of registered agent and title if applicable.

Agent Capital Agent  
(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Shirley Bauman President</u> <u>1864 SW 81st Lane</u> <u>DAVIE, FL 33324</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Verachmil L. Gersh</u> <u>6901 Environ Blvd Apt 3-8</u> <u>LAUDERHILL, FL 33309</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Margaret Undercuffler</u> <u>1505 SW 2nd St #109</u> <u>Fort Lauderdale 33312</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>David Nelson</u> <u>1505 SW 2nd St #109</u> <u>Fort Lauderdale 33312</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Tammy Taylor</u> <u>1505 SW 2nd St #109</u> <u>Fort Lauderdale 33312</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Nicole Anderson</u> <u>1530 SW 15th Ave</u> <u>Fort Lauderdale 33312</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Shirley Bauman

4/20/02

CR2E037B (12/01)