

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

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90435 023 \*\*\*\*61.25

**DOCUMENT #** N97000001180

1. Entity Name

Rockin' Renegades Inc



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

15140 Whetstone Way

Suite, Apt. #, etc.

3. Mailing Address

15140 Whetstone Way

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft Lauderdale FL

City & State

Ft Lauderdale FL

4. FEI Number

65-0739285

Applied For

Not Applicable

Zip

33331

Country

USA

Zip

33331

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Vikki Yarborough

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

15140 Whetstone Way

City

Ft Lauderdale

FL

Zip Code

33331

**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. 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

**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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D  
NAME Vikki Yarborough  
STREET ADDRESS 15140 Whetstone Way  
CITY-ST-ZIP Ft Lauderdale FL 33331

TITLE D  
NAME Beckie Baker  
STREET ADDRESS 4481 N W 3rd Court  
CITY-ST-ZIP Coconut Creek FL 33066

TITLE D  
NAME Staci Precanico  
STREET ADDRESS 1898 Capeside Circle  
CITY-ST-ZIP Wellington FL 33414

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**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:

Beckie Babu

2/5/03

954-745-10105

CR2E037B (12/02)