

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002988

FILED
Apr 30, 2003
Secretary of State

Entity Name: SHELTER FOR LIFE, INC.

Current Principal Place of Business:

1125 NW 27TH AVE
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1125 NW 27TH AVE
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0923413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ALEXANDER
1125 NW 27TH AVE
FORT LAUDERDALE, FL 33311

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBINSON, ALEXANDER
Address: 1125 NW 27TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T () Delete
Name: ROBINSON, DERYCK
Address: 1125 NW 27 AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: ROBINSON, CHERCOLBY
Address: 1125 NW 27TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: WHITELOW, JEFF
Address: 1125 NW 27 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C/D (X) Change () Addition
Name: ROBINSON, ALEXANDER
Address: 1125 NW 27TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D/T (X) Change () Addition
Name: BATTLE, WILLIE
Address: 1125 NW 27 AVE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: M/D (X) Change () Addition
Name: BATTLE, TRACEY L
Address: 1125 NW 27 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Change (X) Addition
Name: BATTLE, HINTON
Address: 1125 NW 27 AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXANDER ROBINSON

C/D

04/30/2003

Electronic Signature of Signing Officer or Director

Date