2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMEN

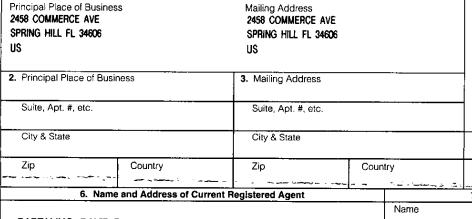
1. Entity Name

COLLECTIBLE



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90256 019 ***150.00

11# P(15099			
TREASURES [POLLHOUSE, INC.			
iness	Mailing Address 2458 COMMERCE AVE			



SPRING HILL FL 34606		Spring Hill FL 34606	SPRING HILL FL 34606						
US		US							
2. Principal F	2. Principal Place of Business 3. Mailing Address				T ROOTION THE NOTICE DESIGNATION OF THE PROPERTY OF THE PROPER	8 8 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NIO 10118 NON 1801		
Suite, Apt. #, etc. Suite, Apt. #, etc.			·		☐ CHECK HERE IF MAKING CHANGES				
City & State City & State			<u> </u>		4. FEI Number 59-3627508		Applied For		
Zip	Country	Zip	İ	Country		5. Certificate of Status Desired \$8		Not Applicable Additional	
6. Name and Address of Current Registered Agent				<u> د پیاسته د کناه</u>	7. N	lame and Address of New Registe	Fee Requ		
				Name		and and Address of New Hogiste	neu Agent		
BARTALINO, DAVID B				1					
2458 COMMERCE AVE			Street Address (P.O. Box Number is Not Acceptable)						
	11LL FL 34606		-						
orning r	11LL FL 34000								
	<u> </u>			City			FL Zip C		
 The above the obligation 	e named entity submits this statement tions of registered agent.	t for the purpose of changing	its registered	d office or regis	stered age	ent, or both, in the State of Florida.	l am familiar wit	h, and accept	
	. 3 3							1	
SIGNATURE .								·	
	Signature, typed or printed name of registered age	ent and little if applicable. (Ni	OTE: Registered /	Agent signature requ	uired when rei	nstating) D	ATE		
F	ILE NOW!!! FÉE IS \$150.00		•			9. Election Campaign Financing			
	r May 1, 2003 Fee will be \$550.0				f	Trust Fund Contribution.		.00 May Be ded to Fees	
Make Check	k Payable to Florida Department	of State					_ /		
10.		ID DIRECTORS	11.		ADI	DITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 11	
TITLE	DPV	☐ Delete	TITLE				☐ Change	e 🗀 Addition	
NAME	BARTALINO, DAVID B		NAME						
STREET ADDRESS	2458 COMMERCE AVE	•	STREET	ADDRESS	٠.				
CITY-ST-ZIP	SPRING HILL FL 34606		CITY-S	T-ZIP					
TITLE	ST	☐ Delete	TITLE				Change	e 🔲 Addition	
NAME	BARTALINO, DAVID B		NAME					ĺ	
STREET ADDRESS	2458 COMMERCE AVE			ADDRESS					
CITY-ST-ZIP	SPRING HILL FL 34606	ليسوغ وي المحتيم في الرائد الماشور الرائد الا المساعد	CITY-S	T-ZIP.	مين، ياد م			·	
TITLE		Delete	TITLE				☐ Change	e 🔲 Addition	
NAME			NAME				-		
STREET ADDRESS CITY-ST-ZIP				ADDRESS		•			
			CITY-S	1-ZIP					
TITLE NAME		☐ Delete	TITLE				☐ Change	e 🔲 Addition	
STREET ADDRESS			NAME	ADDRESS					
CITY-ST-ZIP			CITY-S						
TTLE IAME		☐ Delete	TITLE				☐ Change	e 🔲 Addition	
TREET ADDRESS			NAME STREET	ADDRESS			•	.]	
CITY-ST-ZIP			CITY-SI				•		
ITLE						<u> </u>			
IAME !		☐ Delete	TITLE NAME				☐ Change	Addition	
TREET ADDRESS				ADDRESS				ĺ	
ITY-ST-ZIP			CITY-SI						

12. I hereby certify that the information supplied with this filling 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 607, 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 tipe empowered.

SIGNATURE:

Daytime Phone #