FILED
03 JUL 28 AM 10: 27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000015290

1. Entity Name
WANTED DEAD OR ALIVE ANTIQUES, INC.

600022165336
08/08/03--01029--030 **150.00

Principal Place of Business	Mailing Address
5018 SO. RIDGEWOOD AVE. PORT ORANGE, FL 32127	5018 SO. RIDGEWOOD AVE. PORT ORANGE, FL 32127

X CHECK HERE IF MAKING CHANGES

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 59-3637142 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BROOKS, DAVID 5018 SO. RIDGEWOOD AVE. PORT ORANGE, FL 32127	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 [signature] — 7/24/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROOKS, DAVID 5018 SO. RIDGEWOOD AVE. PORT ORANGE, FL 32127	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST BROOKS, ROY 102 TYNDALE ST ROSLINDALE, MA 02131	X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8/7/28 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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 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 like empowered.

SIGNATURE: [signature] 7/24/03 (386) 316-7049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

WANTED DEAD OR ALIVE ANTIQUES, INC.
5018 S. RIDGEWOOD AVENUE
PORT ORANGE, FL 32127

July 24, 2003

Florida Department of State
Division of Corporations
Attn: Mr. Sean Toner
P.O. Box 6327
Tallahassee, Florida 32399

Dear Mr. Sean Toner:

I have not received notices of the annual payment due for this year because of a problem with our mail system. Find enclosed my annual payment due for the year 2003 in the dollar amount of One Hundred and Fifty Dollars. Also, enclosed is the UBR(Uniform, Business Report) with the following change made and noted for myself: Mr. Roy Brooks – Title: Vice President and Secretary/Treasurer to be deleted.

If you need any additional information, contact my Secretary, Karen Emmerson at the address noted above.

Sincerely,

Roy Brooks