## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P00000020162 DOCUMENT #

1. Entity Name

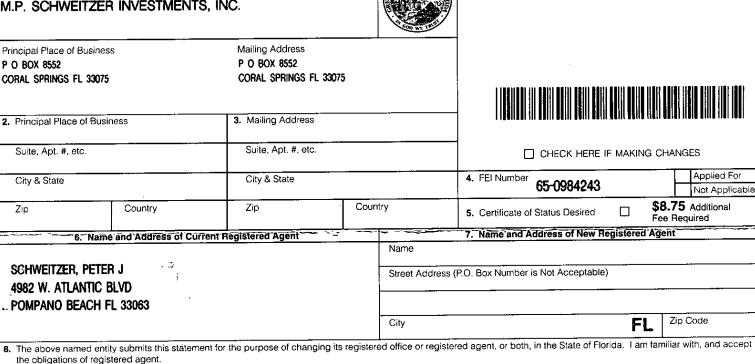
M.P. SCHWEITZER INVESTMENTS, INC.

Make Check Payable to Florida Department

10. TITLE

NAME STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP



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

02-10-2003 90401 042 \*\*\*150.00

		Trainio		
EITZER, PETER J V. ATLANTIC BLVD	Street Address (P.O. Box Number is Not Acceptable)			
ANO BEACH FL 33063				
	City	FL	Zip Code	
cove named entity submits this statement for the purpose of changing its ligations of registered agent.	registered office or registered	d agent, or both, in the State of Florida. I am fan	niliar with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE	: Registered Agent signature required w	hen reinstating) DATE		
After May 1, 2003 Fee will be \$550.00 heck Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND D		
P CHWEITZER, PETER P.O. BOX 8552 CORAL SPRINGS FL 33075	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Change ☐ Addition	
Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
Delete	TITLE NAME STREET ADDRESS		Change Addition	
RESS .	CITY-ST-ZIP			
☐ Delete	TITLE NAME	(	Change Addition	
RESS	STREET ADDRESS CITY-ST-ZIP			
PRESS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS