

03 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 APR 25 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000044913

1. Entity Name

Philshire Ventures, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2202 N. Westshore Blvd.

Suite, Apt. #, etc.

Suite 200

City & State

Tampa, FL 33607

Zip

Country

USA

3. Mailing Address

2202 N. Westshore Blvd.

Suite, Apt. #, etc.

Suite 200

City & State

Tampa, FL 33607

Zip

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1007199

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Donald P. DeCort

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

Law Office of Donald P. DeCort, P.A.

115 South Fielding Ave, Suite 3

City

Tampa

FL

Zip Code

33606

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

Don DeCort Donald P. DeCort, Esq.

4/22/03

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$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

TITLE Director DELETE
NAME Cook, Richard C.
STREET ADDRESS 13876 S.W. 56 Street #314
CITY-ST-ZIP Miami, Florida 33175

TITLE Director DELETE
NAME Denning, David I.
STREET ADDRESS Post Office Box 17465
CITY-ST-ZIP Red Bank, Tennessee

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director, President Addition
NAME William James O'Carney
STREET ADDRESS 2202 N. Westshore Boulevard, Suite 200
CITY-ST-ZIP Tampa, Florida 33607

TITLE
NAME 800017114178
STREET ADDRESS 04/25/03--01082--009 **150.00
CITY-ST-ZIP

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CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Don DeCort Donald P. DeCort, Esq., Corporate Counsel 4/22/03 254-6156 (813)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Page #

CR2E034B (12/02)

7/4/03