

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 10, 2002 8:00 am**  
**Secretary of State**

05-10-2002 90012 048 \*\*\*150.00

DOCUMENT # *P00000056834*

1. Entity Name

*I NEED A WINNER, .com*

**DO NOT WRITE IN THIS SPACE**

**80093503**

2. Principal Place of Business

*1121 S. Military Trl*

Suite, Apt. #, etc.

*230*

City & State

*Deerfield Beach, FL*

Zip

*33486*

Country

*USA*

3. Mailing Address

*1121 S. Military Trl*

Suite, Apt. #, etc.

*230*

City & State

*Deerfield Beach, FL*

Zip

*33486*

Country

*USA*

4. FEI Number

*65-1039019*

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

*Jeffrey Lebowitz*

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

*6574 N. STRD 7 #183*

City

*Coconut Creek*

Zip Code

*33073*

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.

SIGNATURE

*[Signature]*

*Jeffrey Lebowitz*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

☒

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE	<i>VP</i>
NAME	<i>Jeffrey Lebowitz</i>
STREET ADDRESS	<i>6574 N. STRD 7 #183</i>
CITY-ST-ZIP	<i>Coconut Creek FL 33073</i>
TITLE	
NAME	
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CITY-ST-ZIP	

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other like empowered.

*[Signature]*

*Jeffrey Lebowitz*

*4/29/02*

*954 741-7686*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034B (12/01)