2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)						FILED Feb 19, 2002 8:00 am			
DOCUMENT # P0000070681 1. Entity Name ATTILA TREND INC.						Secretary 02-19-2002 9012	y of Sta	te	
Principal Place of Business 26350 OLD 41 RD BONITA SPRINGS FL 34135-6658			Mailing Address 26350 OLD 41 RD BONITA SPRINGS FL 34135-6658				11 88 111 1 88 11 88 11 8 8 11 1		
2. Principal Place of Business			3. Mailing Address					 11 	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE 4. FEI Number FO 0000704 Applied For			
City & State Zip Country		n,	City & State Zip Country			59-3080701	No	t Applicable	
				Country		Pertificate of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current I			Registered Agent Name		7. N	ame and Address of New Regist	ered Agent		
BARKO, BELA 22260 FOUNTAIN LAKES BLVD., APT. 218 ESTERO FL 33928				Street A	Street Address (P.O. Box Number is Not Acceptable)				
				City	City FL Zip Code				
SIGNATURE _	named entity submits			egistered office or		ent, or both, in the State of Florida.	DATE		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of St		50.00	Election Campaign Financin Trust Fund Contribution.		0 May Be to Fees	
11.		OFFICERS AND DIR		12.	AD	DITIONS/CHANGES TO OFFICERS	S AND DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BARKO, BELA 22260 FOUNTAIN ESTERO FL 33928		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOV BARKO, ATTILA 22260 FOUNTAIN ESTERO FL 33928	LAKES BLVD, AP	□ Delete T 218	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIG ASULO RESIDENCE OF SIGNING OFFICER OF DIRECTOR President Date Date Date Date SIGNATURE: