## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR)

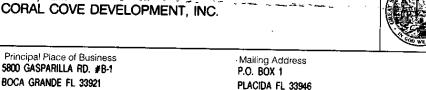
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**FILED** Mar 03, 2003 8:00 am Secretary of State

03-03-2003 90442 017 \*\*\*150.00

OCUMENT # P0000094210		O THE STREET
-Entity Name  ORAL COVE DEVELOPMENT, INC.		
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2. Principal Place of Business	3. Mailing Address	<del></del>
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & Class	



Li	CHECK	HERE	IF	MAKING	CHANGES

City & State		City & State		4. FEI Number 65-1045944	 Applied For
Zíp	Country	Zip	Country	5. Certificate of Status Desired	 \$8.75 Additional Fee Required

o. Name and Address of Current Registered Agent	7. Name and Address of No
WHITE, HAROLD C	Name .
PO BOX 667	Street Address (P.O. Box Number is Not Accept
137 BONO STREET	
CLEWISTON FL 33440	City

7. Name and Address of New Registered Agent			
'			
P.O. Box Number is Not Acceptable)			
	<del></del>		

<ol> <li>The above named entity submits this statement for the purpose of changing its registe the obligations of registered agent</li> </ol>		<u> </u>
above harried criticy subtritts this statement for the purpose of changing its register	red office or registered agent, or both, in the Chair of Classes, i.e.,	
the obligations of registered agent.	and direct of registered agent, or both, in the state of Florida. I am fair	Miliar with, and accent.
, the congations of registered agent.		man man and addopt
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	Signature, typed or printed name of registered agent and title i	applicable
F	ILE NOW!!! FEE IS \$150.00	

After May 1, 2003 Fee will be \$550.00

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9. Election Campaign Financing

\$5.00	May Be
Added to	Fees

Zip Code

Make Check Payable to Florida Department of State				Trust Fund Contribution. Added to Fees
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	IGLESIA, ROBERTO J 5718 WESTHEIMER RD, STE 1806 HOUSTON TX 77057	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THORNTON, JACK 5718 WESTHEIMER RD, STE 1806 HOUSTON TX 77057	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABELLO, CARLOS 5718 WESTHEIMER RD, STE 1806 HOUSTON TX 77057	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME	☐ Change ☐ Addition

TREET ADDRESS_	D ABELLO, CARLOS 5718 WESTHEIMER RD, STE 1806 HOUSTON TX 77057	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 and the same in the same	☐ Change	Addition	
tle Ame Reet Address Ty-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	, u , , , , ,	 ☐ Change	☐ Addition	
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ITILE Delete	TITLE	☐ Change	Addition
STREET ADDRESS	NAME STREET ADDRESS		
ITY-ST-ZIP	CITY-ST-ZIP		

Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information symbiled with this filling sizes 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 his 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:

713-977-5718