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

## P00000101250 **DOCUMENT#**

1. Entity Name

H & G CASSIDY ENTERPRISES, INC.



## **FILED** Apr 23, 2003 8:00 am Secretary of State

04-23-2003 90141 035 \*\*\*150.00

		Mailing Address			$\dashv$					
Principal Place of Busin -183.CASSIDY_RD										
-183 CASSIDY_RD					_			~- <del>-</del> -		=
DIGHTE FIRE ( E GEO)										
2. Principal Place of Business		3. Mailing Addres	3. Mailing Address			E NABEHBAN ISI) ABEHE KANIN BUJUL BANIK K	DIM IIRIK ODIAL IK			
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State			4. FEI Number 53-2585278			pplied For ot Applicable	-
Zip	Country	Zip	Coun	try		Certificate of Status Desired	Fee	<b>75</b> Add Required		
6. Name and Address of Current Registered Agent					7. 1	Name and Address of New Rec	istered Ager	ıt		]
				Name						1
ELLENBURG, LISA 1136 ENGLISH LANE				Street Addre	ss (P.O. B	ox Number is Not Acceptable)		~~~		1
WESTVILLE FL 324		3.								
			,	City		FL			Zip Code	
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										
Signature, ty	ped or printed name of registered age	ent and title if applicable.	(NOTE: Registere	d Agent signature req	uired when re	instating)	DATE			1
FILE NOV				Section Campaign Finar	ncina	\$5.0	<b>0</b> May Be			
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State						Trust Fund Contribution.		Added	to Fees	
10.	OFFICERS AND DIRECTORS				AD	DITIONS/CHANGES TO OFFIC	FRS AND DIR	FCTORS	3 IN 11	1
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NAME HAROLI	), CASSIDY		NAM	E						1 5
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	the information supplied w	ith this filing does not a			Section 1	119.07(3)(i), Florida Statutes. I fu	irthar cartify *	nat the in	formation	1
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

