## 2003 FOR PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #**

## P00000108182

1. Entity Name

ENTERPRISE ALITO PAINTING AND RODY BEDAID



## **FILED** Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90970 015 \*\*\*150.00

Principal Place of Business 440-444 N.W. 27TH AVENUE FORT LAUDERDALE FL 33311  2. Principal Place of Business		Mailing Address 440-444 N.W. 27TH AVENUE FORT LAUDERDALE FL 33311  3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 65-1056104 Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of New Registered Agent
		· · · · · · · · · · · · · · · · · · ·	Name	The state of the state of Agent
	NW 27TH AVE.		Street Add	dress (P.O. Box Number is Not Acceptable)
FURI LA	UDERDALE FL 33311		ļ	
9. The chaus			City	FL Zip Code egistered agent, or both, in the State of Florida. I am familiar with, and accept
Afte Make Checi 10.	PSTD OFFICERS AND L	State	11.	Trust Fund Contribution.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME Street Address City-St-Zip	NARINE, BASIL 440-444 N.W. 27TH AVENUE FORT LAUDERDALE FL 33311		NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME Street Address City-St-Zip	83	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
ITLE IAME STREET ADDRESS STY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
ITLE IAME		☐ Delete	TITLE NAME	☐ Change ☐ Addition
TREET ADDRESS ITY - ST - ZIP			STREET ADDRESS CITY-ST-ZIP	The second secon
TLE AME TREET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TLE AME REET ADDRESS IY-ST-ZIP		☐ Delete -	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I further certify that the information 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

SIGNATURE:

2-20-03