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

## FILED May 20, 2002 8:00 am Secretary of State 05-20-2002 90259 007 \*\*\*150.00

DOCUMENT # 1. Entity Name	600000	114663	
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1. Entity Nam		7111002			03-20-2002 90239 0	130.00
Co	untertop Crea	utions, In	c. 1			
	DO NOT WRITE	IN THIS SF	ACE.			
2. Principal P	Place of Business ON.43 AURNUR	3. Mailing Address	13 Avenu			
Suite, Apt.		Suite, Apt. #, etc.	C IIICIW		DO NOT WRITE IN THIS SPA	ACE
City & Stat	lywood, FlA.	City & State	I FLA.	4. FEI Number	1066878	Applied For Not Applicable
<sup>Zip</sup> }ንረ	Country A	-33071 -	Country	5. Certificate of S	Fe	3.75 Additional e Required
	DO NOT WI	RITE	Name A D Street Address	7. Name and Addr A F. Bos Ss (P.O. Box Number is	ess of Current Registered A \( \frac{1}{2} \)  Not Acceptable)	gent ,
	IN THIS SP.	ACE	3600 city Was	South S	tate Road /	Zip Code
8. The above	named entity submits this statement for	the purpose of changing its r	egistered office or regis	stered agent, or both, in	the State of Florida.	3023
SIGNATURE )	Signature, typed or printed name of registered agent am	id title if applicable. (NOTE:	Registered Agent signature requ	uired when reinstating)	DATE	
		Contract Con				
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. iria on back)	After May 1 Amended	ay 1 Fee is \$150.00 I Fee is \$550.00 UBR is \$61.25 In to Department of S	Trust F	n Campaign Financing und Contribution.	\$5.00 May Be Added to Fees
Tax filing (See criter	requirement and elects to do so. ria on back)  OFFICERS AND D	After May Amended Make Check Payabi	I. Fee is \$550.00 UBR is \$61.25	Trust F		
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indicated on this report or supplemental report is due and accurate and mat my signature shall have the same legal effect as it made under load; that it am an officer 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.