2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P00000116245

DOCUMENT # 1. Entity Name

PEGGY MALONE & ASSOCIATES, INC.



FILED
Mar 17, 2003 8:00 am
Secretary of State
03-17-2003 90104 038 ***158.75

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ADOWS RD ST		Mailing Address 9250 BAYMEADOWS RD STE 230 JACKSONVILLE FL 32256									
lace of Busine	ess	3. Mail	3. Mailing Address								
#, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
е		City & State			4. F	4. FEI Number 59-3689184 Applied For Not Applicable					
	Country	Zip Country			ry -===-	5.	5. Certificate of Status Desired \$8.75 Additional Fee Required				
6. Name	and Address of Current	Registere	Registered Agent			7. Name and Address of New Registered Agent					
					Name					j	
			Street Addres			ess (P.O. B	(P.O. Box Number is Not Acceptable)				
									· · · · · · · · · · · · · · · · · · ·		
					City			FL	·		
		or the purp	ose of changing its	registere	ed office or reg	istered ag	ent, or both, in the State of Flori	da. I am fa	miliar with, a	and accept	
Signature, typed	or prin active of registered agent	פראם וווים וו פרא	licable. (NOT	E: Registered	d Agent signature re	quired when re	instating)	DAIL -			
r May 1, 200	3 Fee will be \$550.00	of State								May Be to Fees	
K Payable to				144		A D	DITIONS (CHANGES TO OFFIC	TERS AND I	DIRECTORS	S IN 11	
	OFFICERS AND	DIRECTO		_		AL	DITIONS/CHANGES TO OFFIC			Addition	
MALONE, 13245 ATT	LANTIC BLVD STE#4		L) Delete	NAM STRE	et address				Orlango		
JACKSON	VILLE PL 32223	<u>-</u> .	Delete						Change	Addition	
	» بندر رمینست			STRE	ET ADDRESS	" ·	and the second				
i			☐ Delete	NAM STRE	E ET ADDRESS				Change	☐ Addition	
			☐ Delete	NAM STRE	E Et address				☐ Change	☐ Addition	
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			☐ Delete	NAM	. 1	•	4		☐ Change	☐ Addition	
	ADOWS RD ST LE FL 32256 Place of Busine #, etc. G. Name N, C. RANDO (MEADOWS NVILLE FL 33 Pe named entity tions of registr Signature, typed TILE NOW!! IT May 1, 200 k Payable to D MALONE, 13245 ATI JACKSON	#, etc. #, etc. #, etc. #, etc. Country 6. Name and Address of Current N, C. RANDOLPH (MEADOWS RD STE 230 NVILLE FL 32256 E named entity submits this statement fortions of registered agent. Signature, typed or print of registered agent FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND D MALONE, PEGGY CLAIR 13245 ATLANTIC BLVD STE#4 JACKSONVILLE FL 32225	ADOWS RD STE 230 JE FL 32256 Place of Business #, etc. Country Country Country Signature, typed or prince of registered agent and use in carry FILE NOW!!! FEE IS \$150.00 In May 1, 2003 Fee will be \$550.00 IN MALONE, PEGGY CLAIR 13245 ATLANTIC BLVD STE#4 JACKSONVILLE FL 32225	## etc. Suite, Apt. #, etc. ## etc. Suite, Apt. #, etc. ## etc. City & State ## Country Zip ## Address Z	## Signature. Pyped or print Total Department of State Signature. Pyped or print Total Department of State	Mailing Address ADDWS RD STE 230 LE FL 32256 Mailing Address 9250 BAYMEADOWS RD STE 230 JACKSONVILLE FL 32256 Place of Business 3. Mailing Address 9250 BAYMEADOWS RD STE 230 JACKSONVILLE FL 32256 Place of Business 3. Mailing Address 9250 BAYMEADOWS RD STE 230 JACKSONVILLE FL 32256 City & State Country Country Street Address City Street Address City Street Address City Signature, hypero or privacy business statement for the purpose of changing its registered office or registors of registered agent are no war an equilibrative. City MALONE, PEGGY CLAIR 13245 ATLANTIC BLUD STE#4 JACKSONVILLE FL 32225 Delete MALONE, PEGGY CLAIR 13245 ATLANTIC BLUD STE#4 JACKSONVILLE FL 32225 Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete NAME STREET ADDRESS CITY-ST-ZIP NAME	Mailing Address Seto Business Mailing Address Seto BayMEADOWS RD STE 230 JACKSONVILLE FL 32256 Place of Business 3. Mailing Address #, etc. Suite, Apt. #, etc. Be City & State Country Zip Country Zip Country Street Address (P.O. B) Street Address (P.O. B) Street Address (P.O. B) WILLE FL 32256 City Sename and Address of Current Registered Agent N, C. RANDOLPH MEADOWS RD STE 230 WILLE FL 32256 City Sename entity submits this statement for the purpose of changing its registered office or registered agent on or or orgistered agent agent agent when received agent ag	Mailing Address \$20 BYTE 20 \$20 BYTE 20 \$20 BYTE 20 \$20 BYTE 200 \$20 B	Mailing Address SCOWS RD STE 20 SCORNILLE FL 32256 #, otc. Chy & State Current Registered Agent N, C. RANDOUPH NREADOWS RD STE 230 WILLE FL 32256 City & State City & State City & State Country State City State Country State City State Country State City State State State City State State State City State State State City State State State City FL Cit	Making Address ### ### ### ### #### ##############	

indicated on this report or supplier with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #