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

## **DOCUMENT #**

P01000018615

1. Entity Name

JEFFREY CHOW INC.

1	COE WE THE

05-05-2003 90200 042 \*\*\*150.00

May 05, 2003 8:00 am Secretary of State

**FILED** 

Residence of Escances  Residence of Business  Suite. April 4. etc.  City A. State  A. FELINarror  S. Cettification of Status Desired  Fine Reputated  Fine Reputated  Fine Reputated  Fine Reputated  Fine Reputated  Fine Reputated  Address (Tit) Ben't Number is Not Acceptable)  MILITARY  MACE  Strong Address (Tit) Ben't Number is Not Acceptable)  File Novilli Field is statement for the outpose of changing its regulatered office or registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent are both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with, and accept the obligations of registered agent or both, in the State of Priorita. I am farmiser with a state of Priorita.						i	- WE						
Suite Apt. #, etc.   CHECK HERE IF MAKING CHANGES   Appl. #, etc.   City & State   4. FEI Number   65-1080575   Appl. #, etc.	62 INDIAN TRACE #184			62 IN	62 INDIAN TRACE #184				T 				
City & State  Country  Country  Country  Special Address of Current Registered Agent  Name  Na	2. Principal Place of Business			<b>3.</b> Ma	3. Mailing Address					111 <b>1111</b> 11			
SPET Addition   Section	Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
S. Certificate of Status Desired	City & Stat	te		City	City & State			4.	FEI Number <b>65-1080575</b>				
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MIROT, MARK 4421 HOLLYWOOD BLVD HOLLYWOOD FL 33021    City   FL   Zin Code		6. Name	and Address of Curre	nt Register	ed Agent			7.	Name and Address of New Regi	stered Aç	ent		
### AUDITIONS (Changes fro. Dotte) ### Delice #### Delice ##### Delice ####################################							Name						
City   FL   Zio Code			BLVD	·			Street Address (P.O. Box Number is Not Acceptable)						
B. 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, spead or private remain at inspiratoria. (NOTE: Registered Agent Signature required when rendering)  DATE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITILE  NAME  VENTURA, STEPHEN  SINEET ADDRESS  CITY-ST-2P  TITLE  NAME  SIREET ADDRESS  CITY-ST-2P  TITLE  NAME  SIRET ADDRESS  CITY-ST-2P  TITLE  NAME  SIRET ADDRESS  CITY-ST-2P  T							··············						
SIGNATURE    Signature   Signa						ſ	City			FL	Zip Cod	e	
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		Artify that the	e information supplied w	ith this filing	does not qualify for			d in Section	119 07/3Vil Florida Statutes 1 fun	ther cortifi	v that the i-	nformation	

purate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the empowered. of the corporation or the re changed, or on an attach

SIGNATURE: