

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000020257

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: REGINALDS OF BOCA, INC.

Current Principal Place of Business:

7491 N. FEDERAL HWY., C-5, #261
BOCA RATON, FL 334871658

New Principal Place of Business:

407 EAST CORAL TRACE CIRCLE
DELRAY BEACH, FL 33445

Current Mailing Address:

7491 N. FEDERAL HWY., C-5, #261
BOCA RATON, FL 334871658

New Mailing Address:

FEI Number: 65-1094459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, REGINALD A
715 N.W. 2ND ST.
DELRAY BEACH, FL 33444

Name and Address of New Registered Agent:

COX, REGINALD A
407 EAST CORAL TRACE CIRCLE
DELRAY BEACH, FL 33445

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.

SIGNATURE:

04/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: COX, REGINALD A
Address: 715 N.W. 2ND ST.
City-St-Zip: DELRAY BEACH, FL 33444

Title: D (X) Delete
Name: COX, REGINALD A
Address: 715 N.W. 2ND ST.
City-St-Zip: DELRAY BEACH, FL 33444

Title: D (X) Delete
Name: COX, KAYLA M
Address: 715 N.W. 2ND ST.
City-St-Zip: DELRAY BEACH, FL 33444

Title: D (X) Delete
Name: COX, AKYLAH R
Address: 715 N.W. 2ND ST.
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COX, REGINALD A
Address: 715 N.W. 2ND ST.
City-St-Zip: DELRAY BEACH, FL 33444

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REGINALD A. COX

P

04/29/2002

Electronic Signature of Signing Officer or Director

Date