## 2002 Uniform Business Report (UBR)

200	2 Uniform Busi	inéss repor	t (ubr	)		<del></del> _"	1 1	
DOCU 1. Entity Na	JMENT # P01630	·				!		
AQUARIC	US SILKSCREEN, INC. ARIUS' SILK SCRE	EN, INC.	MI	E D	— CHANG			
Principal Pla	ace of Business	Mailing Address 02	APR 15	PH 5:	ľn			
5931 PALMEI SARASOTA I		5931 PALMER RIVID	CRETARY I LAHASSEI	T T	=	1 <del>1</del> 1 ma		
2. Principal Place of Business 3. Mailing Address					1		H	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04/01/02 40024 024 150.			
City & State		City & State		È	FEI Number 	<u> </u>	Applied For Not Applicable	
Zip	Country	عربية الاستفتاء المسيدان الواقا الما	ountry	-25:1	Certificate of Status Desired 🔝 🗏	38.75 Ae Fee Requir	iditional	
<del></del>	6. Name and Address of Current R	legistered Agent	Name	7. (	Name and Address of New Regist	ered Agent		
ENST, RO	ONALD A	- <del></del>	£	KNS	T, RONALD A	<u> </u>		
· · · <del>-</del>	MER BLVD		Street Addi	ess (P.O. E	Box Number is Not Acceptable)			
SARASOT	TA FL 34232							
			City			FL Zip Co	de	
8. The above	e named entity submits this statement for	the purpose of changing its regis	tered office or re-	gistered ag	ent, or both, in the State of Florida.			
SIGNATURE	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE: Regist	tered Agent algreture n	Quirêd when re		ATE		
Tax filing	poration is eligible to satisfy its Intangible requirement and elects to do so. eria on back)	FILE NOW!!! FE After May 1, 2002 Fe Make Check Payable to	ee will be \$550.		10. Election Campaign Financing Trust Fund Contribution.	<b>.</b>	00 May Be	
11.	OFFICERS AND D		2.	AD	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENST, RONALD A 5931 PALMER BLVD SARASOTA FL 34232	N S	ITLE IAME TREET ADDRESS ITY-ST-ZIP	ERN	ST, RONALD A	Change	CEC nottippy (9)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		N S	ITLE AME TREET ADDRESS ITY-ST-ZIP	<del></del>		☐ Change	☐ Addition 85	
TITLE			TLE .	<u> </u>	<u></u>	☐ Change		
NAME STREET ADDRESS CITY-ST-ZIP		sı	AME TREET ADDRESS TY-ST-ZIP					
TITLE			TLE	· <u> </u>		☐ Change	☐ Addition	
NAME STREET ADDRESS		41	ME Treet address				_	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	TY-ST-ZIP				i	
TITLE NAME			TLE			☐ Change	Addition	
STREET ADDRESS		li i	ME Reet address	•				
CITY-ST-ZIP		cn	TY-ST-ZIP					
TITLE .		—· · · · · · · II	TLE ME			Change	Addition	
STREET ADDRESS CITY-ST-ZIP	·	STI	REET ADDRESS					
13. I hereby c	certify that the information supplied with thi	in filling does not qualify for the au-	Y-ST-ZIP	Castina 1	10.07/2V/3 Florida Company			
of the corr	on this report or supplemental report is tru poration or the receiver or trustee empower or on an attachment with an address, with	and to accorde this count or rem	emption stated in ature shall have t uired by Chapter	n section 1° he same le 607, Florida	19.07(3)(i), Horida Statutes. I further igal effect as if made under oath; the a Statutes; and that my name appear	certify that the in it I am an officer irs in Block 11 or	tormation or director Block 12 if	
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