

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90129 017 ***150.00

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DOCUMENT # P01000029841

1. Entity Name
U SHINE - WE SHINE, INC.



Principal Place of Business
1826 NW 29 ST
FORT LAUDERDALE FL 33311

Mailing Address
2339 NW 28TH STREET
SUITE B
FORT LAUDERDALE FL 33311



2. Principal Place of Business
1826 NW 29 St
Suite, Apt. #, etc.

3. Mailing Address
3850 SW 10 St
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Oakland Park, FL
Zip
33311
Country
Broward

City & State
Ft Land FL
Zip
33312
Country
Broward

4. FEI Number 65-1084760

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRADWELL, RICKEY
2339 NW 28TH STREET
SUITE B
FORT LAUDERDALE FL 33311
3850 SW 10 St
Ft Land FL 33312

Name
Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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 Rickey Bradwell
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME BRADWELL, RICKEY
STREET ADDRESS 2339 NW 28TH STREET
CITY-ST-ZIP FORT LAUDERDALE FL 33311

TITLE D ☒ Change ☐ Addition
NAME Rickey Bradwell
STREET ADDRESS 3850 SW 10 St
CITY-ST-ZIP Ft Land FL 33312

TITLE D ☐ Delete
NAME BRADWELL, CONSTANCE
STREET ADDRESS 2339 NW 28TH STREET
CITY-ST-ZIP FORT LAUDERDALE FL 33311

TITLE D ☒ Change ☐ Addition
NAME Constance Bradwell
STREET ADDRESS 3850 SW 10 St
CITY-ST-ZIP Ft Land FL 33312

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rickey Bradwell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/03

954-739-9600

CR2E034 (10/02)