

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90193 024 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000035999

1. Entity Name

PAUL PICARD, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1685 s. Banana River Drive

Suite, Apt. #, etc.

3. Mailing Address
1685 s. Banana River Drive

Suite, Apt. #, etc.

City & State
Merritt Island FL

City & State
Merritt Island FL

4. FEI Number
59-3489972

Applied For
☐ Not Applicable

DO NOT WRITE IN THIS SPACE

Zip
32932

Country
USA

Zip
32932

Country
USA

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

7. Name and Address of Current Registered Agent

Name **PAUL PICARD**

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

1685 s. Banana River Drive

City **Merritt Island**

FL

Zip Code
32932

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE

PAUL PICARD, REGISTERED AGENT

03/11/2003

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent Signature required when registering)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/P/S/T
Picard, Paul
1685 S Banana Rv. Dr, Merritt Island, FL 32932

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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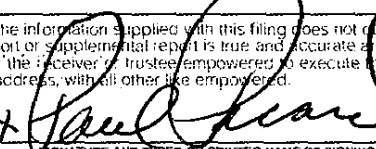
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: 

PAUL PICARD, PRESIDENT

3/11/03

321-243-4619

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)