2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000037697 DOCUMENT



FILED Jan 21, 2003 8:00 am Secretary of State

1. Entity Nar CHEERS		G COMPANY,	INC.						01-21-2	2003 90	194 02	2 ***15	50.00	
Principal Place of Business 13540 SW 119 STR MIAMI FL 33186			1354	Mailing Address 13540 SW 119 STR MIAMI FL 33186				ł	11 811888	1841 (1844) 33 41	14 8 8 14 8 8 11	10 (1)		9101 1 68 1 1 72 1
2. Principal F	Place of Busir	ness	3. Ma	iling Address	•									
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & State			City	City & State				4. FEI Nu	imber 65-1	nn-1114nn44				plied For Applicable
Zip \$	- A N	Country	Zip						cate of Status I			\$8.75 Fee Re		
	6. Name	and Address of Cu	irrent Registere	ed Agent		Name		7. Name	and Address	of New Re	egistered	f Agent		
	ES, ROBER	πo				Street Add	dress (P.	O. Box Nu	mber is Not Ad	cceptable)				
13540 SV MIAMI FL	V 119 STR 33186													
Mid 4411 7 L	. 00100					City						ı Zic	Code	
8. The above	e named entity	y submits this statem	nent for the purp	oose of changing its	registere	,	egistere	d agent, o	both, in the Si	tate of Flor	Fl ida. I an	┕╎╵		
_	tions of regist	erea agent.				•	•							
SIGNATURE :	Signature, typed	or printed name of registered	d agent and title if app	olicable. (NOT	E: Registered	d Agent signature	required w	hen reinstating	•		DATE			
								•	"					
		! FEE IS \$150.00					·			paign Fina			\$5 00) May Bo
Afte	r May 1, 200	! FEE IS \$150.00 33 Fee will be \$55 5 Florida Departmo	0.00						Election Cam Trust Fund Co		incing			May Be to Fees
Afte	r May 1, 200 k Payable to	3 Fee will be \$55 Florida Departme	0.00	RS	11.			9.	Election Cam	ontribution	ancing	□ <i>A</i>	Added 1	to Fees
After Make Check	r May 1, 200 k Payable to PSVD	OFFICERS	0.00 ent of State	PRS Delete	TITLE	1		9.	Election Cam Trust Fund Co	ontribution	ancing	□ <i>A</i>	dded TORS	to Fees
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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:

SIGNAT