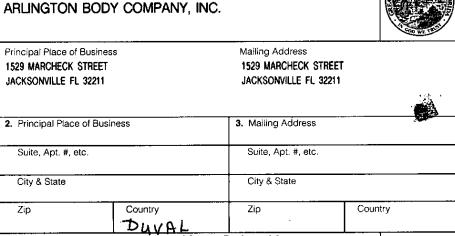
## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P01000042807

1. Entity Name



## FILED Jan 07, 2003 8:00 am Secretary of State

01-07-2003 90023 035 \*\*\*150.00

9880000

CHECK HERE IS MAKING CHANGES

2. Principal Place of Business		3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.  City & State			CHECK HERE IF MAKING CHANGES			
City & Stat	е			4.	4. FEI Number 59-3714275		<b> </b>	plied For at Applicable
Zip	Country	Zip	Country	5.	. Certificate of Status Desire	d 🗆	\$8.75 Add	
	6. Name and Address of Current	t Registered Agent		7.	Name and Address of New	w Registered	Agent	
			Name	•				
ALLEN, R	ONALD		Street A	Street Address (P.O. Box Number is Not Acceptable)				
1529 MAF	RCHECK STREET		Olicet 7	.00.17 6631100	Box Namber is Net Accepte			
JACKSON	VILLE FL 32211							
0, 10, 100			City				Zip Cod	
						FL	•	
	named entity submits this statement for	or the purpose of changing its r	egistered office o	r registered a	agent, or both, in the State of	Florida. I am	familiar with,	and accept
the obligat	ions of registered agent.							
CIONATURE -	Carried Commence	N. #			***			
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	Registered Agent signat	ture required wher	n reinstating)	, a DATE		
			<u> </u>	رون خر وجهان این م	THE THE PARTY OF T	<u> </u>		
r	ILE NOW!!! FEE IS \$150.00			i una salamina arri	9. Election Campaign			<b>0</b> Мау Ве
	r May 1, 2003 Fee will be \$550:00 c Payable to Florida Department c				Trust Fund Contribu	ution. L	_ Added	to Fees
					,			
			T 44		ADDITIONS (CHANGES TO 6	SELECTION AND	DIDECTOR	C IN 44
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO C	OFFICERS AND		
10. TITLE	OFFICERS AND		TITLE	2	LETT	OFFICERS AND	DIRECTOR  Change	
10. TITLE NAME	OFFICERS AND  OFFICERS AND  ALLEN, RONALD	DIRECTORS	TITLE NAME	<u>ک</u>	a 411EN			
10. TITLE NAME STREET ADDRESS	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	DIRECTORS	TITLE NAME STREET ADDRESS	S Wilm +529	a RIIEN MARCHECK	sT.		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND  OFFICERS AND  ALLEN, RONALD	D DIRECTORS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Wilm 1529 Jacks	a 411EN	sT.	Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	DIRECTORS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm 1529 Jacke	B RIVEN MARCHECK Sonville, FL. 33	sT.		Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S Wilm 1529 Jacks T Donn	B RIVEN MARCHECK SONVILLE, FL. 33	\$T.	Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S Wilm 1529 Jacks T Donn 3756	A ALIEN  A ALIEN  A ALIEN  MANOR DAK	\$T. 1211	Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Wilm 1529 Tacks T Donn 3750 Jack	B RIVEN MARCHECK SONVILLE, FL. 33	\$T. 1211	☐ Change	Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm 1524 Toonw 3750 Took	A ALIEN  A ALIEN  MARCHECK  MARCHECK	\$T. 1211	Change	☑ Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S Wilm 1524 Took 3756 Jock C NATH	A ALIEN  A ALIEN  A ALIEN  A ANOR DAY  SONVILLE, FL. 33	\$T. 1211 .\$ 70%	☐ Change	<b>∠</b> Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S Wilm 1529 Tack Took Took C NATH 3750	A ALIEN  A ALIEN  MANOR ORK  AN ALIEN  MANOR OAK  MANOR OAK	5T. 1211 5 DV 1277 2 Dr.	☐ Change	<b>∠</b> Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Wilm 1529 Took 3750 Took C NATH 3750 Took	A ALIEN  A ALIEN  A ALIEN  A ANOR DAY  SONVILLE, FL. 33	5T. 1211 5 DV 1277 2 Dr.	☐ Change	Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm 1529 Tacke Tonn 3750 Tack NATH 3750 Tack	A ALIEN  MARCHECK  MARCHECK  MARCHECK  MANOR ORK  MONVILLE, FL. 33  AN ALIEN  MANOR OAK  SONVILLE, FL. 3	5T. 1211 5 DV 1277 2 Dr.	☐ Change	Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME NAME	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S Wilm V529 Tack Donn 3750 Tack NATH 3750 Tack M	A RIVEN MARCHECK MARCHECK MARCHECK MANOR DAK MONVILLE, FL. 33 AN ALLEN MANOR DAK SONVILLE, FL. 33	5T. 1211 1277 1277	☐ Change	Addition
10.  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S Wilm VS 2 4 Took Took Took C NATH 3750 Took M FLOY IS 14	A RILEN MARCHECK MARCHECK MARCHECK MANOR DAK	5T. 1211 1217 1277 12277	☐ Change	Addition
10.  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS STREET ADDRESS	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Wilm VS 2 4 Took Jock VATH 3750 VATH 3750 MELOY IS 14	A RIVEN MARCHECK MARCHECK MARCHECK MANOR DAK MONVILLE, FL. 33 AN ALLEN MANOR DAK SONVILLE, FL. 33	5T. 1211 1277 1277 5T.	☐ Change ☐ Change ☐ Change	Addition  Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE TITLE TITLE TITLE	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	D DIRECTORS  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm VS 2 4 Took Jock VATH 3750 VATH 3750 MELOY IS 14	A RILEN MARCHECK MARCHECK MARCHECK MANOR DAK	5T. 1211 1277 1277 5T.	☐ Change	Addition  Addition
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10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE TITLE	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm VS 2 4 Took Jock VATH 3750 VATH 3750 MELOY IS 14	A RILEN MARCHECK MARCHECK MARCHECK MANOR DAK	5T. 1211 1277 1277 5T.	☐ Change ☐ Change ☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	Delete  Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	S Wilm VS 2 4 Took Jock VATH 3750 VATH 3750 MELOY IS 14	A RILEN MARCHECK MARCHECK MARCHECK MANOR DAK	5T. 1211 1277 1277 5T.	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D ALLEN, RONALD 1529 MARCHECK STREET	Delete  Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	S Wilm VS 2 4 Took Jock VATH 3750 VATH 3750 MELOY IS 14	A RILEN MARCHECK MARCHECK MARCHECK MANOR DAK	5T. 1211 1277 1277 5T.	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition

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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15/03

904-743-1225

Daytime Phone #