FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State
04-23-2003 90303 041 ***158.75

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DOCUMENT # P01000052931

1. Entity Name

GEORGE HORAK, P.A

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8970 SEMINOLE BLVD	8970 SEMINOLE BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SEMINOLE, FLORIDA	City & State: SEMINOLE
Zip: 33772 Country: USA	Zip: 33772 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3716787 ☐ Applied For, ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: GEORGE HORAK, P.A.

Street Address (P.O. Box Number is Not Acceptable): 8970 SEMINOLE BLVD

City: SEMINOLE FL Zip Code: 33772

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: GEORGE HORAK George Horak President 4.21.2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE	PRESIDENT	
NAME	GEORGE HORAK 33772	
STREET ADDRESS	8970 SEMINOLE BLVD	
CITY-ST-ZIP	SEMINOLE	
TITLE	VICE PRESIDENT	
NAME	GEORGE HORAK FL 33772	
STREET ADDRESS	8970 SEMINOLE BLVD	
CITY-ST-ZIP	SEMINOLE	
TITLE	SECRETARY	
NAME	GEORGE HORAK FL 33772	
STREET ADDRESS	8970 SEMINOLE BLVD	
CITY-ST-ZIP	SEMINOLE	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: George Horak GEORGE HORAK, President 4.21.2003 727 4554508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #