

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000053022

FILED  
Feb 07, 2003  
Secretary of State

Entity Name: THE FRAGRANT LEMON PEEL CATALOGUE COMPANY

**Current Principal Place of Business:**

1017 NW 132ND AVE  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1017 NW 132ND AVE  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 04-3592085

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DRAIZIN, TODD  
1017 NW 132ND AVE  
SUNRISE, FL 33323

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DRAIZIN, SCOTT  
Address: 1009 NW 132ND AVE  
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete  
Name: DRAIZIN, TODD  
Address: 1017 NW 132ND AVE  
City-St-Zip: SUNRISE, FL 33323

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: DRAIZIN, SCOTT  
Address: 1009 NW 132ND AVE  
City-St-Zip: SUNRISE, FL 33323

Title: VP (X) Change ( ) Addition  
Name: DRAIZIN, TODD  
Address: 1017 NW 132ND AVE  
City-St-Zip: SUNRISE, FL 33323

Title: SEC ( ) Change (X) Addition  
Name: DRAIZIN, KIMBERLY  
Address: 1009 NW 132ND AVE  
City-St-Zip: SUNRISE, FL 33323

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TODD DRAIZIN

VP

02/07/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date