

2002 **FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90449 039 \*\*\*150.00

DOCUMENT # P01000060032

1. Entity Name

RINA STUART & ASSOCIATES, INC. ✓

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
4959 SW 33rd Way  
Suite, Apt.#, etc.

3. Mailing Address  
4959 SW 33rd Way  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Ft. Lauderdale, Florida  
Zip 33312 Country U.S.

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Zip 33312 Country U.S.

4. FEI Number  
65-1118771

Applied Fee  
Not Applicable

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name: Stuart, Rina  
Street Address (P.O. Box Number is Not Acceptable): 4959 SW 33rd Way  
City: Ft. Lauderdale FL Zip Code: 33312

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

Signature (Typed or printed name of registered agent and title, if applicable)

DATE (Registered agent's date of signature, not when received)

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 1 Added to Fee

11. OFFICERS AND DIRECTORS

TITLE: PSD  
NAME: Stuart, Rina  
STREET ADDRESS: 4959 SW 33rd Way  
CITY-ST-ZIP: Ft. Lauderdale, Florida 33312

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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my name shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver of such corporation, and that my name appears on the report or supplemental report as required by Section 119.07(3)(d), Florida Statutes, and that my name appears in Block 11 or 12 of this attachment with an address, with all other blocks prepared.

SIGNATURE:

*Rina H. Stuart*

*4/30/02*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #