2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P01000061144

1. Entity Name

DANIA CORNER, INC.



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90347 001 ***300.00

				OO WE I	3				
Principal Plac	ce of Business	Mailing Address		<u> </u>	•				
2447 MONROE		2447 MONROE ST							
HOLLYWOOD	FL 33020	HOLLYWOOD FL 330	120) (48) (189) (1) 46) (1) (16) (48) (48)	88HH 88HB 81	101 11006 1101	4 BIBIL 8181 1881
2. Principal P	Place of Business	3. Mailing Address	3. Mailing Address				16 116 1 111 6 1 1		
0 31 0 1		Suite Ant # ota		<u> </u>					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF	MAKING	CHANGE	S
City & Stat	re	City & State			4.	. FEI Number 65-1117471		<u> </u>	Applied For
						00-1117471		<u> </u>	Not Applicabl
Zip	Country	Zip	Cour	ntry	5.	. Certificate of Status Desired		\$8.75 Ad	
	6. Name and Address of Curre	nt Registered Agent			7.	Name and Address of New Re			
			. ختنجمتن	Name~-	E.S	يوروچ (ماي <mark>نشيخسس</mark> سم مايستان الدر الميتا		:	•.
BUTEAU,	CHRISTINE	•	Street Address			(P.O. Box Number is Not Acceptable)			
2447 MON	NROE ST								
HOLLYWO	OOD FL 33020								
•				City			FL	Zip Co	ode
• The above	named entity submits this statemen	t for the oursee of changi	na ite reaister	ed office or re	enistered a	agent, or both, in the State of Flori		 amiliar with	h and accept
	tions of registered agent.	rior the purpose of changi	ng its register	ca omeo or re	giotoroa	agont, or both, in the class of their			.,
0.0									
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registere	ed Agent signature	required wher	n reinstating)	DATÉ		
F	ILE NOW!!! FEE IS \$150.00								
_	r May 1, 2003 Fee will be \$550.0	00				 9. Election Campaign Fina Trust Fund Contribution. 			.00 May Be ed to Fees
Make Checi	k Payable to Florida Department	t of State							
10.		ND DIRECTORS	11.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	DISTERNI CUBICTINE	☐ Delete	1111					☐ Change	e
NAME Street Address	BUTEAU, CHRISTINE 2447 MONROE ST		NAN ats	ME EET ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL 33020			7-ST-ZIP					
TITLE		☐ Delete	TITL	E				☐ Change	Additio
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STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				7-ST-ZIP					Addition
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NAME STREET ADDRESS			NAM STR	eet address					
CITY-ST-ZIP				Y-ST-ZIP					

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 experienced 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 attactment with an address with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

4/21/03 (984) 925-937

☐ Change

☐ Addition