

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000073035**

1. Entity Name

The Protein Connection, incFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 SEP 20 PM 12:40

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10 WEST ADAMS STREET

3. Mailing Address

10 WEST ADAMS STREET

Suite, Apt. #, etc.

#108

Suite, Apt. #, etc.

#108

City & State

Jacksonville 32202

City & State

Jacksonville FL

Zip

FL

Country

USA

Zip

32202

Country

USA

4. FEI Number

☒ Applied For☐ Not Applicable

5. Certificate of Status Desired

☒**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Ricky P. Batch

Street Address (P.O. Box Number is Not Acceptable)

10 West Adams Street #108

City

Jacksonville

FL

Zip Code

32202**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

9/19/02

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 Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
Pres./Treas.	Mike Bryan	PO Box 56426 Jacksonville, FL	32241

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
Vice Pres.	Brad Williams	PO Box 56426 Jacksonville, FL	32241

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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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)(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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/19/02 904-591 8105

Daytime Phone

CP2034B (12/01)

9/20

9/19/02

1 Michael Bryan, President of
The Protein Connection, Inc. Did
not receive a UBR. in 2002.

Please call if you have
any questions.

(904) 591-8105

Mike Bryan

