2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000079723 DOCUMENT

1. Entity Name

NORTH ATLANTIC CONSULTING, INC.

COO WE THE

FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90228 026 ***150.00

				COO WE TH					
Principal Place of Business 1 LAS OLAS CIRCLE SUITE 1516 FORT LAUDERDALE FL 33316			Mailing Address 1 LAS OLAS CIRCLE SUITE 1516 FORT LAUDERDALE FL 33316						
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE	IF MAKING	CHANGES	
City & State			City & State			4. FEI Number APPLIED FOR Applied For Not Applicab			
	Country	Zip	Country			cate of Status Desired		\$8.75 Add	ditional
6. Name	and Address of Current	Registered Agent			7. Name	and Address of New P	Registered	Agent	
				Name			.eg.o.o.o.		
		*** •			(P.O. Box Number is Not Acceptable)				
AS CIRCLE									
FORT LAUDERDALE FL 33316				City		· ·	FL	Zip Cod	
		the purpose of chang	ing its registere	ed office or registe	ered agent, o	r both, in the State of Flo	orida. I am	familiar with,	and accept
Signature, typed	or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	Agent signature require	ed when reinstating	g)	DATE		
May 1, 200	3 Fee will be \$550.00	State	· · · · · · · · · · · · · · · · · · ·		9.				0 May Be to Fees
- 4,4510 10									
D) (AT	OFFICERS AND				ADDITIO	NS/CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
ALEL, GEI 1 LAS AL	AS CIRCLE STE 1516	☐ Delete	NAME .STREE	ET ADDRESS				☐ Change	☐ Addition
		□ Delete	NAME STREE	ET ADDRESS				Change	☐ Addition
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		☐ Delete	STREE CITY-	T ADDRESS ST-ZIP		. :		Change	Addition
	6. Name 6. Name 8, AXEL B AS CIRCLE 16 10DERDALE 10 May 1, 200 Payable to 11 LAS AL/ FORT LAL	CIRCLE RDALE FL 33316 lace of Business #, etc. Country 6. Name and Address of Current I S, AXEL B AS CIRCLE I6. IDERDALE FL 33316 named entity submits this statement for ons of registered agent. Signature, typed or printed name of registered agent a LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of OFFICERS AND I PVST ALEL, GERHARDS B 1 LAS ALAS CIRCLE STE 1516 FORT LAUDERDALE FL 33316	CIRCLE ROALE FL 33316 COUNTRY City & State Country City & State Country Country City & State Country F. AXEL B AS CIRCLE ROBERDALE FL 33316 Romanded entity submits this statement for the purpose of changons of registered agent. Signature, typed or printed name of registered agent and title if applicable. LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State OFFICERS AND DIRECTORS PVST ALEL, GERHARDS B 1 LAS ALAS CIRCLE STE 1516 FORT LAUDERDALE FL 33316 Delete Delete	CIRCLE SUITE 1516 RDALE FL 33316 ROALE FL 33316 ROUTEY Country Zip Country Zip Country S, AXEL B AS CIRCLE B. B. B. COUNTRY AS CIRCLE COUNTRY Zip Country Coun	Mailing Address CIRCLE 1 LAS OLAS CIRCLE SUITE 1516 FORT LAUDERDALE FL 33316 Race of Business 3. Mailing Address #, etc. Suite, Apt. #, etc. City & State Country Zip Country Zip Country 6. Name and Address of Current Registered Agent Name S, AXEL B AS CIRCLE 16. DERDALE FL 33316 City City Street Address Street Agent Name Name Name Name None of registered agent None of registered agent City City City None on or registered agent None of registered agent None of registered agent City Delete Title NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete	Mailing Address CIRCLE 1 LAS OLAS CIRCLE SUITE 1516 FORT LAUDERDALE FL 33316 A Mailing Address I LAS OLAS CIRCLE SUITE 1516 FORT LAUDERDALE FL 33316 A Mailing Address A Mailing Addr	Malling Address ORICLE 1 LAS OLAS CIRCLE SURE 1516 FORT LAUDERDALE FL 33316 Iace of Business 3. Mailing Address F, etc. City & State Country Country Country Country Country 5. Certificate of Status Desired F. Name and Address of Current Registered Agent Name S, AXEL B AS CIRCLE 6. DERDALE FL 33316 City City City City City City City Cit	and Business GRICE 1 AS OLAS CIRCLE SURTE 158 SURTE 158 SURTE 158 SURTE 158 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 SURGE PART 1, etc. CHECK HERE IF MAKING CITY A State 4. FEI Number APPLIED FOR Country Zip Country 5. Certificate of Status Desired S. AVEL B STReat Address of Current Registered Agent 7. Name and Address of New Registered , B. STReat Address (P.O. Box Number is Not Acceptable) DERDALE FL 33316 City FL City	Mailing Address T LAS QUAS CIRCLE SURTE 116 FORT LAUDERDALE FL 33316 A Mesting Address J. Mesting Address J. Mesting Address J. Mesting Address J. Mesting Address J. Mesting Address J. Mesting Address J. Country

Interest certain the mornation supplied with this fining does not quality 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 flat 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 of 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 attachment with an address, with all prier like empowered.

SIGNATURE:

1-954-523-0613

Daytime Phone #