2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 03, 2003 8:00 am

DOCUMENT # P01000080962 1. Entity Name MR. STERN, INC.							Secretary of State 03-03-2003 90497 048 ***150.00				
Principal Place of Business 4280BRAIR LANE C NAPLES FL 34103				Mailing Address 9720 PINES BLVD PEMBROKE PINES FL 33024-6226			 				
2. Principal Place of Business				ailing Address	17	1					
Suite, Apt. #, etc.			Su	ite, Apt. #, etc.		1	CHECK HERE IF	MAKING	CHANGE:	S	
City & State			City & State				4. FEI Number 65-1130733 Applied For				
Zip Country		Zip	Zip		try	5. Cer	tificate of Status Desired		\$8.75 A		
6. Name and Address of Curren			Registered Agent		<u> </u>		7. Name and Address of New Registered Agent				
			3 5 131			Name	r. ivan	ie and Address of New Re	gistered A	gent	
STERN, E		79304 4280 BR	TAR	AR LANE C		Street Address (P.O. Box Number is Not Acceptable)					
	Frings Fe			FL 34103		114	· · ·				
						City			FL Zip Code		
8. The above	e named entit ations of regis	y submits this statement fo	or the purp	pose of changing its	registere	d office or register	ed agent,	or both, in the State of Florid	da. Lam fa	miliar with	and accept
SIGNATURE	Signature, typed	or printed name of registered agent	and title if ap	olicable. (NOTE	E: Registered	Agent signature required			DATE		
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of								Election Campalgn Finar Trust Fund Contribution.	ncing		DO May Be d to Fees
	DTC	OFFICERS AND	DIRECTO		11.		ADDIT	ONS/CHANGES TO OFFIC	ERS AND [DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS Stern, Ei 4280 Bel/ Naples F	NRE LANE C		Delete		T ADDRESS ST-ZIP				☐ Change	Addition
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NTLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP			[_ Change	Addition
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ITLE Ame Treet address ITY-ST-ZIP				. Delete	TITLE NAME STREET CITY-S	ADDRESS I-ZIP] Change	Addition
 I hereby conditions indicated a company of the corp changed. 	ertify that the on this report poration or the or on an attac	or supplemental recort is receive of trustee impo	vered to e	does not qualify for the courate and that my execute this report as if the courage is the courage in the courage is the courage in the courage is the courage in the courage is the courage is the courage in the courage in the courage in the courage is the courage in the courag	he exemp signatur s required	otion stated in Sect e shall have the sa d by Chapter 607, I	tion 119.0 me legal Florida Sta	7(3)(i), Florida Statutes. I fur effect as if made under oath atutes; and that my name ap	ther certify ; that I am pears in B	that the in an officer of lock 10 or	formation or director Block 11 if

SIGNATURE:

D'RE REQUIRED