2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE MAME SMITH, GREGORY E SAMTH, GREGORY E SMITH, GREGORY SMITH	1. Entity Na	JMENT # P01000 CAPITAL ADVISORS, INC.	0091718			Secreta: 04-29-2002 9	ry of St	ate	. !
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C. Name and Address of Current Registered Agent SMITH, GREGORY E 2453 DORSET CT NAPLES FL 34112 City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code SIGNATURE Signature, Typed or preced name of inspirence agent and title a coultable. P. This corporation is eligible to satisfy its intamplice Task (flips of the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, Typed or preced name of inspirence agent and title a coultable. P. This corporation is eligible to satisfy its intamplice Task (flips of quite emerit and before the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature—are and elects to do an. (See corporation is eligible to satisfy its intamplice Task (flips of quite emerit and before the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE SIGNATUR	Zip	Country	Zip	Country	·	2 2 7 2 1 7 2	□ \$8.75 Ad	Iditional	
SMITH, GREGORY E 2453 DORSET CT NAPLES FL 34112 City		6. Name and Address of Current Re	egistered Agent				•	ed	
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	ON ACTIVITY OF	DECORVE		Name			3		ĺ
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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 Signa	NAPLES	· ·							İ
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9. This corporation is eligible to satisfy its intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible Tax filling requirement and elects to do so. Security is intangible to Department of State 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS IN 11 TITLE SMITH, GREGORY E SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS STOPS I JULY ST. 2P STO	8. The above	e named entity submits this statement for ti	ne purpose of changing its re	egistered office or regi	stered ag	ent, or both, in the State of Florid			
This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Anter May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees	SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signature reg	uired when re	einstating)	DATE	. ·	Ì
Tax filing requirement and elects to do so. (See critoria on back) After May 1, 2002 Fee will be \$\$50.00 May Be Added to Fees 11.	9. This corp	oration is eligible to satisfy its Intangible	<u> </u>						
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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 Block 12 if changed, or on an attachment with a parties, with all other like empowered.	of the core	or this report of supplemental report is itu	e and accurate and that my red to execute this report as						