## **2003 FOR PROFIT CORPORATION**

Mailing Address

SUITE 300

1401 MANATEEAVE W

**BRADENTON FL 34205** 

UNIFORM BUSINESS REPORT (UBR) P01000092444 **DOCUMENT #** 

1. Entity Name

Principal Place of Business

1401 MANATEEAVE W

**BRADENTON FL 34205** 

SUITE 300

RABĆO CONSTRUCTION, INC.



**FILED** May 05, 2003 8:00 am Secretary of State

05-05-2003 90123 005 \*\*\*150.00

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2. Principal Place of Business 1401 MANATEL AVE W. 1401 MANATEL AVE W.						
Suite, Apr. #, etc. # 300		Suite, App # etc. #300		CHECK HERE IF MAKING CHANGES		
City & Stat	• X 1 _ 1	City & State	forl, 5L	4. FEI Number 65-1022585	Applied For Not Applicable	
Zip 342	U.S. A	zip 34205	U.S.A.	G. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current R	7. Name and Address of New Registered A	gent			
KEZAR, M 1401 MAN SUITE 300	IATEE AVENUE WEST		Name Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
BRADENTON FL 34205			City	FL	Zip Code	
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. I am familiar with, and accept the obligations of registered agent.  Signature. Signature, typed or printed name of registered agent and title if applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BUDD, RICHARD 2303 58TH STREET EAST PALMETTO FL 34221	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BUDD, ANDREA 2303 58TH STREET EAST PALMETTO FL 34221	□ Delete	TITLE NAME STREET ADDRESS ÇITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD KEZAR, MATTHEW 6116 9TH AVENUE CIRCLE NE BRADENTON FL 34202	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change _ ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEZAR, TRACY 6116 9TH AVENUE CIRCLE NE BRADENTON FL 34202	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE Name Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	

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 empowered 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 attachment with an address, with all other the empowered.

SIGNATURE:

CR2E034 (10/02)