

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90050 028 ***150.00

DOCUMENT # P01000094599

1. Entity Name

P S & D INVESTMENTS CORP.



Principal Place of Business

**5881 NW 151 STREET #101
MIAMI LAKES FL 33014**

Mailing Address

**5881 NW 151 STREET #101
MIAMI LAKES FL 33014**

2. Principal Place of Business

2721 Executive Park Dr.

3. Mailing Address

2721 Executive Park Dr.

Suite, Apt. #, etc.

Suite 3

Suite, Apt. #, etc.

Suite 3

City & State

Weston, FL

City & State

Weston, FL

Zip

33331

Country

Zip

33331

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1140950

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SALVER, PAUL

5881 NW 151 STREET #101

MIAMI LAKES FL 33014

**2721 Executive Park Dr.
#4
Weston, FL 33331**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/03

☒ **FILE NOW!!! FEE IS \$150.00**

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

**D
NAME
SALVER, PAUL
STREET ADDRESS
5881 NW 151 STREET #101
CITY-ST-ZIP
MIAMI LAKES FL 33014**

TITLE ☐ Delete

**D
NAME
SEA
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

**2721 Executive Park Dr.
Suite 3, Weston, FL 33331**

TITLE ☐ Change ☒ Addition

**Director
NAME
Karen Salver
STREET ADDRESS
2721 Executive Park Dr., Suite 3
CITY-ST-ZIP
Weston, FL 33331**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/03 954-389-1333

Date

Daytime Phone #

CR2E034 (10/02)