2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000094963 **DOCUMENT #**

1. Entity Name

FLORIDAUSA BUSINESS BROKERS, INC.



FILED Jan 06, 2003 8:00 am Secretary of State 01-06-2003 90017 027 ***150.00

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Principal Place of Business 1960 BEACH ROAD ENGLEWOOD FL 34223			1960	Mailing Address 1960 BEACH ROAD ENGLEWOOD FL 34223			1			/ V U	មេមូន	22		
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2. Principal Place of Business 3. Mailing Address								1 1881188	f 131 8818 7 71 814 8 8	1111 88111 88111		41410 19114		
Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & Stat	te		City & State				4. FEI Number 65-0074594 Applied For Not Applicable							
Zip Country			Zip			Country		rtificate (of Status Desi	red [3.75 Add e Require		
	6. Name	and Address of Curre	nt Registere	ed Agent	<u> </u>	1	7. Na:	me and	Address of N	ew Registe		•		
		-: -: ·		-		Name	,				-			
	L, FRANK E .CH ROAD	3 JR				Street Address	s (P.O. Box	Number	r is Not Accep	table)		•		
	OOD FL 342	223			1960	Be	4cH	RD.						
						City					FL	Zip Cod	е	
SIGNATURE .	 	or printed name of registered age	ent and title Rapp	ilicable.	E. Registere	nt Agent signature requir	red when reins	tating)		1/3/0	3 DATE			
Afte	r May 1, 200	!! FEE IS \$150.00 03 Fee will be \$550.0 o Florida Department							ction Campaig st Fund Contri	•	g 🗆		00 May Be d to Fees	
10.		OFFICERS AN	D DIRECTO	RS	11.		ADDI	TIONS/0	CHANGES TO	OFFICERS	AND D	IRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1960 BEA	L, FRANK B JR. CH ROAD OOD FL 34223		☐ Delete] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VEVIEW		☐ Delete		į.	.,] Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP				□ Delete] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ŷ			☐ Delete] Change	Addition	
TITLE NAME Street Address City-St-Zip				☐ Delete] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- T	e information supplied w	ale ale e	Delete	CITY-	E Et address -St-Zip] Change	Addition	

maintained on minimal report or supplies restricted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR