2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000100541

1. Entity Name

BRANDON PHILLIPS WOOD WORKING, INC.

900.00

FILED

03 FEB -5 AM 9: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
201 HUNT STREET SUITE 613 CLERMONT FL 34711	201 HUNT STREET SUITE 613 CLERMONT FL 34711

REINSTATEMENT
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

4. FEI Number 59-3746803 ☐ Applied For ☐ Not Applicable

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145	Name BRANDON PHILLIPS Street Address (P.O. Box Number is Not Acceptable) 201 HUNT ST. APT 613 City CLERMONT FL Zip Code 34711

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 BRANDON PHILLIPS, PRESIDENT
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE 2-3-03

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE **PSTD** NAME **PHILLIPS, BRANDON A** STREET ADDRESS **201 HUNT STREET SUITE 613** CITY-ST-ZIP **CLERMONT FL 34711**	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 7000118892287 02/05/03--01084--007 **900.00	☐ Change ☐ Addition
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CR2E034 (9/01)

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 an address, with all other like empowered.

SIGNATURE: BRANDON PHILLIPS (PRESIDENT) 2-3-03 (352)396-9663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #