## 2002 Uniform Business Report (UBR)

DOCUMENT # P010001011  1. Entity Name  FL. SLUDGE INC.						Secretary of State 04-09-2002 90039 006 ***150.00					
Principal Place of Business Mailing Address											
592 OLD DIXIE HIGHWAY VERO BEACH FL 32962		592 OLD DIXIE HIGHWAY VERO BEACH FL 32962				1 (68);61	11 121 <b>8378</b> 1 41 <b>6</b> 11 <b>8</b> 5	2111 BA111 OATA 1	DAI UDADA ALBAH UDATA	1(88) 3(8) (83)	
2. Principal Place of Business		3. Mailing Address			-						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			-	DO NOT WRITE IN THIS SPACE					
City & Stafe		City & State			4.	4. FEI Number Applied For					
Zip j	Č Country	Žip Coun		try			\$8.75 Add				
	egistered Agent				Name and	Address of N	w Registere	Fee Require ed Agent	d		
JAHOLKOWSKI, MIKE				Name							
	DIXIE HIGHWAY		Street Address (P.O. Box Number is Not Acceptable)								
VERO BEACH FL 32962				City				F	Zíp Code	e	
Tax filing r (See criter	Smaltire, typed or print dame of registered agent an oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!! After May 1, 200 Make Check Payab	!! FEE !	vill be \$550.00	 0	reinstating)  10. Elec	tion Campaig			<b>0</b> May Be to Fees	
TITLE	OFFICERS AND D	IRECTORS Delete	12.		ΑC	ODITIONS/C	HANGES TO	OFFICERS A	ND DIRECTORS  Change	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	JAHOLKOWSKI, MIKE 592 OLD DIXIE HIGHWAY VERO BEACH FL 32962	□ Delete	NAME STREE						Citalige	Adollion	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jaholkowski, Mike 592 Old Dixie Highway Vero Beach FL 32962	☐ Delete	III .	l l	·				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JAHOLKOWSKI, MARICIA 592 OLD DIXIE HIGHWAY VERO BEACH FL 32962	☐ Delete	III .	i	ē			·	☐ Change ·	Addition	
TITLE NAME STREET ADDRESS: CITY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-:	T ADDRESS					☐ Change	Addition	
TITLE NAME STREET ADDRESS : CITY-ST-ZIP	1.4.1 (A)	☐ Delete	TITLE NAME STREE CITY-5	T ADDRESS					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with th	Delete	CITY-S	T ADDRESS ST-ZIP	Sec. 41	110.07/07/2	Florida		Change	Addition	

5. I nereby 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:

MATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR