

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90261 029 ***150.00

UCR0302 AV

DOCUMENT # P01000105697

6275

1. Entity Name
KURT RUBY COPPERWORKS, INC.

Principal Place of Business Mailing Address
6993 COLLEGE COURT, BLDG. 4, UNIT 204 **6993 COLLEGE COURT, BLDG. 4, UNIT 204**
DAVIE FL 33317 **DAVIE FL 33317**



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

4. FEI Number **65-1148643** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUBY, KURT
6993 COLLEGE COURT, BLDG. 4, UNIT 204
DAVIE FL 33317

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

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	RUBY, KURT		
6993 COLLEGE COURT, BLDG. 4, UNIT 204	6993 COLLEGE COURT, BLDG. 4, UNIT 204		
DAVIE FL 33317	DAVIE FL 33317		
STD	RUBY, KURT JR.		
6993 COLLEGE COURT, BLDG. 4, UNIT 204	6993 COLLEGE COURT, BLDG. 4, UNIT 204		
DAVIE FL 33317	DAVIE FL 33317		

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: *Kurt Ruby* *4/22/02*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)