2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # P01000110199 1. Entity Name NASH INVESTMENT GROUP, INC.					Secretary of State 02-26-2002 90082 041 ***150.00			
Principal Plac	e of Business	Mailing Address	***					
5417 1ST AVENUE N.		5417 1ST AVENUE N.						
ST. PETERSBU	JRG FL 33710	ST. PETERSBURG FL 337	710		1 18891861 (() 88261 ((884	ANTO BROOM BROOM (KURAL KURK)	06/8 1 (4 0 (8/8)	EKIO KOKENOOK
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			, DO NO	T WRITE IN THIS SP	ACE	
City & State		City & State		4.	FEI Number	3078	_ 	plied For t Applicable
Zip	Country	Zip	Country	5. (Certificate of Status Des		8.75 Add	litional
_	6. Name and Address of Current Re	egistered Agent		7. 1	Name and Address of I	New Registered Ag	ent	
SIGNATURE.	named entity submits this statement for the stat	d title if applicable. (NO	P. ANI	e or registered ag	ASH, Presi	Dest Z	2ip Code 3377	2_
Tax filing r	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After May 1, 20 Make Check Paya	002 Fee will b	e \$550.00 nent of State	10. Election Campa Trust Fund Cont	ribution.	Added	May Be I to Fees
11.	OFFICERS AND D	IRECTORS	12.	AC	DITIONS/CHANGES T			
TITLE NAME STREET ADDRESS	D NASH, CELESTE A 5417 1ST AVENUE N.	☐ Delete	TITLE NAME STREET ADDR	ESS		L	Change	☐ Addition
CITY-ST-ZIP	ST. PETERSBURG FL 33710		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS	D NASH, P. ANDREW 5417 1ST AVENUE N.	☐ Delete	TITLE NAME STREET ADDR	ESS		ί	☐ Change	Addition
CITY-ST-ZIP	ST. PETERSBURG FL 33710		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS			Change	Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS		[Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS		[Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS			Change	☐ Addition
indicated	Certify that the information supplied with t d on this report or supplemental report is t rporation or the receiver or trustee empov , or on an attachment with an address, wi	rue and accurate and that vered to execute his repor	my signature sh t as required by	stated in Section iall have the same Chapter 607, Flor	119.07(3)(i), Florida Sta legal effect as if made ida Statutes; and that m	atutes. I further certifunder oath; that I am ny name appears in I	y that the ir n an officer Block 11 or	nformation or director Block 12 if

P. ANDREW NAS/4 Z-8-82, 727-327-933
Date Daytine Phone #