2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Aug 25, 2002 8:00 am Secretary of State

1. Entity No	JMENT# P0100	0114342			08-07-2002 90174	1 007 ***150	0.00	
	MICHELLE ENTERPRISES, I	NC.						
Principal Place of Business Mailin		Mailing Address				* ~ ^ ~ ~ 3		
5080 49TH AVENUE NORTH ST. PETERSBURG FL 33709		5080 49TH AVENUE NORTH ST. PETERSBURG FL 33709						
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.						
					DO NOT WRITE IN THIS SPACE			
City & Sta	ate	City & State	المصحد عن الر	- 4.	FEI Number	,~	Applied For	
Zip Country		Zip Country		-	59-513 //00 Certificate of Status Desired		Not Applicable Additional	
	6. Name and Address of Current R	egistered Agent	<u> </u>		Name and Address of New Regis	Fee Requ	ired	
DEDC#/A			Name		Nume and Address of New Regis	Rered Agent		
5080 491	l, david c I'h avenue north		Street Add	iress (P.O.	Box Number is Not Acceptable)			
ST. PETE	RSBURG FL 33709							
	e named entity submits this statement for ti		City			Zip C		
9. This corpo	Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible		E: Registered Agent signature		einstating)	DATE		
Tax filing requirement and elects to do so. (See criteria on back)		After September 13 Make Check Payab	, 2002 Fee will be s de to Department o	750.00 f State	Election Campaign Financia Trust Fund Contribution.	☐ Ādd	00 May Be ed to Fees	
ILLE,	OFFICERS AND DII	Delete	12.	AD	DITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 11	
NAME: STREET ADORESS STY-ST-ZIP	PERCIVAL, DAVID C 5080 49TH AVENUE NORTH ST. PETERSBURG FL 33709	La Deixie	NAME STREET ADDRESS		·	☐ Change	☐ Addition	
TLE	VD	☐ Delete	CITY-ST-ZIP TITLE			☐ Change	☐ Addition	
AME TREET ADDRESS ITY-ST-ZIP	PERCIVAL, MICHELLE 5080 49TH AVENUE NORTH ST. PETERSBURG FL 33709		NAME STREET ADDRESS CITY-ST-ZIP			E) Orialiga	Auditori	
TLE VME * *	نينيه بنيدر المدارشين دراف الراعاد دعه	☐ Delete	DTLE			☐ Change	☐ Addition	
TREET ADDRESS Ty-St-Zip	• #	•	STREET ADDRESS					
TLE ME		☐ Delete	TITLE	···		☐ Change	☐ Addition	
REET ADDRESS TY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	,				
E AE EET ADDRESS		☐ Deleta	TITLE NAME			☐ Change	Addition	
/-\$1-ZIP			STREET ADDRESS CITY-ST-ZIP					
Æ Æ		☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition	
REET ADDRESS								
Y-ST-ZIP	artify that the information supplied with this in this report or supplemental report is true aration or the receiver or trustee empowers or on an attachment with an address, with a	filing does not qualify for the	CITY-ST-ZIP	0				

Attachment 42024 (HAJEK & HAJEK, C.P.A.'s P.A.

5318 Central Avenue St. Petersburg, Florida 33707

Phone: (727) 327-1239 Facsimile: (727) 327-1461

July 31, 2002

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl 32302-1500

To Whom It May Concern:

If you have any question, please contact me at the office at (727) 327-1239

Sincerely,

Michael Wm. Hajek JII, C.P.A

MWH/dd

Enclosures