

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

1 of 2

DOCUMENT #PO1000120793

1. Entity Name

MIRAGE EQUITIES CORPORATION

FILED

03 FEB 10 AM 9:56

DEPT. OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2002-2003 UBR

2. Principal Place of Business

25 OLD KINGS ROAD, NORTH

3. Mailing Address

P. O. BOX 352501

Suite, Apt. #, etc.

SUITE 3B

Suite, Apt. #, etc.

City & State
PALM COAST, FL

City & State
PALM COAST, FL

4. FEI Number
59-3761218

Applied For
Not Applicable

Zip
32137

Country
USA

Zip
32135

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name GARY A. BLOOM

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

25 OLD KINGS ROAD, NORTH #3B

City PALM COAST FL Zip Code 32137

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

GARY A. BLOOM

01/24/2003

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D GARY A. BLOOM 25 OLD KINGS RD., NO. #3B PALM COAST, FL 32137	TITLE NAME STREET ADDRESS CITY - ST - ZIP	8000011593108 01/31/03--01061--006 **150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	8000011593108 02/11/03--01007--003 **450.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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CR2E034B (12/01)

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 on an attachment with an address, without other like empowerment.

SIGNATURE:

GARY A. BLOOM

01/24/2003 386 447 3797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DO NOT DETACH /

2 of 2

Mirage Equities Corp.

P. O. Box 352501

Palm Coast, Florida 32135

(386) 846 9727

January 24, 2003

Secretary of State
Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: UBR/reinstatement

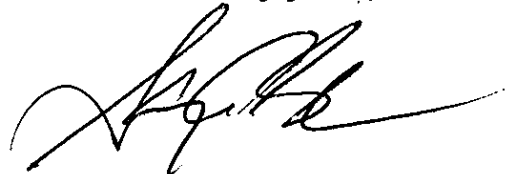
Gentlemen:

Enclosed please find a UBR for filing concerning Mirage Equities Corporation. I note that we never received the form notice and this may be attributable to the fact that we filed a forwarding to our post office box last year and the rural carrier has not always gotten all of the mail to the correct destination. In fact, things tend to straggle in with little or no predictability.

I enclose the customary fee of \$150.00 and respectfully request that any penalties or late fees be waived.

Thank you for your assistance and consideration in this matter.

Sincerely yours,



GARY A. BLOOM