## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P02000007066 DOCUMENT #

1. Entity Name

DEBORAH HARRIS COURT REPORTING, INC.



**FILED** Apr 07, 2003 8:00 am Secretary of State

04-07-2003 90216 015 \*\*\*150.00

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Principal Place of Business 2561 OAK PARK WAY ORLANDO FL 37822		Mailing Address 2561 OAK PARK WAY ORLANDO FL 37822		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 26-0033485 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
***			Name	•
-	Deborah J ( Park way		Street Address	ss (P.O. Box Number is Not Acceptable)
ORLANDO	) FL 32822			
	* · · · · · · · · · · · · · · · · · · ·		City	FL Zip Code
	named entity submits this statement folions of registered agent.	r the purpose of changing it	s registered office or regis	stered agent, or both, in the State of Florida. 1 am familiar with, and accept
SIGNATURE .				
	Signature, typed or printed name of registered agent	and the if applicable. (NO	TE: Registered Agent signature requ	uired when reinstating) DATE
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PSD	Delete	TITLE	☐ Change ☐ Addition
NAME	HARRIS, DEBORAH J		NAME	
STREET ADDRESS	2561 OAK PARK WAY		STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32822		CITY-ST-ZIP	
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Addition
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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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR