2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

FILED Apr 15, 2003 8:00 am Secretary of State 04-02-2003 90096 042 ***150.00

DOCUMENT # PO200013014 1. Entity Name VAN BRERO ENTERPRISES, INC.									-			
Principal Place of Business Mailing Address 121 PALAFOX PLACE, SUITE C 121 PALAFOX PLACE, SUIT PENSACOLA FL 32501 PENSACOLA FL 32501												
Principal Place of Business 3. Mailing Address							1 (1841 1881 414 1841 1841 4 881 1841 184	 	ia 1181 11 1	DI 11811 BIBL 1888		
Suite, Apt. #, etc. Suite, Apt. #, etc.							☐ CHECK HERE IF MAKING CHANGES					
City & Sta	le	Çi	City & State			4.	FEI Number 01 - 058897	1	—	Applied For Not Applicable		
Zip	Countr	y Zi	Zip Cou		ntry		Certificate of Status Desired	Desired S8.75 Additional Fee Required].	
6. Name and Address of Current Registered Agent					, 7. Name and Address of New Registered Agent						7	
VAN BRERO, PETER					Name	، حد						
121 PALAFOX PLACE, SUITE C					Street Addres	ss (P.O. l	Box Number is Not Acceptable)					
PENSACOLA FL 32501											1	
}					City			FL	Zip Co		┪	
8. The above	named entity submits	this statement for the pur	nose of changing its r	ecister	ed office or regis	stered ar	gent, or both, in the State of Flori		nitiar with	and accept	-	
	tions of registered ager		post or origing no	- 9.5.0.	os omeo er regu	5.0.00		. ,		, 4.10 2000 51		
SIGNATURE	Signature, typed or printed nam	ne of registered agent and title it at	oplicable (NOTE:	Flegistere	id Agent signature miqu	uired when n	reinstating)	DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						_	9. Election Campaign Fina Trust Fund Contribution.	~ ~		00 May Be ed to Fees		
10.		OFFICERS AND DIRECT	ORS	11.		AE	ODITIONS/CHANGES TO OFFIC	ERS AND D	RECTO]_	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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 fequired 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.												
SIGNAT	URE 7	COMMENTER E	RECRE		11V BREAD	, らな	esitent 3/31/03	850	५४२	4899	}	
	SIANATUR	E AND THE OR PRINTED HAM	E OF SIGNING OFFICER OR				Date	Daytim	a Phone #		1	