

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90247 049 ***150.00

0156112 AV

DOCUMENT # P02000016178

1. Entity Name
OUR THREE GIRLS, INC.



Principal Place of Business
**1335 ADAMS ST.
HOLLYWOOD FL 33019**

Mailing Address
**1335 ADAMS ST.
HOLLYWOOD FL 33019**

2. Principal Place of Business
1802 S. YOUNG CIRCLE
Suite, Apt. #, etc.

3. Mailing Address
1335 ADAMS ST
Suite, Apt. #, etc.

City & State
HOLLYWOOD FLORIDA
Zip
33020
Country
BROWARD

City & State
HOLLYWOOD FLORIDA
Zip
33019
Country
BROWARD

4. FEI Number
01-059 4154

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FONROUGE, RICHARD A
1335 ADAMS ST.
HOLLYWOOD FL 33019**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when 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 Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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|--|--|---------------------------------|
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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), 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.

SIGNATURE:

SIGNATURE REQUIRED

RICHARD FONROUGE / DIRECTOR / 4-15-03 / 9542497915

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)