2003 FOR PROFIT CORPORATION

DOCUMENT #

UNIFORM BUSINESS REPORT (UBR)

P02000019855

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90418 007 ***150 00

B&TM	OORE, INC.			138		1			
Principal Place of Business 250 INTERNATIONAL SPEEDWAY BLVD. DELAND FL 32720		250 1	Mailing Address 250 International Speedway Blvd. Deland Fl 32720			} 	 		
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Stat	e	City	City & State			4. FEI Number 02-05	61436		oplied For ot Applicable
Zip			Country			5. Certificate of St	atus Desired	\$8.75 Add Fee Require	
6. Name and Address of Current Re						7. Name and Address of New Registered Agent			
Moore, Barry L 250 International Speedway BLVD. Deland FL 32720					Name Street Address (P.O. Box Number is Not Acceptable)				
DELAND FL 32/20			City		ity			Zip Cod	e
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 Signature, typed or printed frame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be									
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						Trust Fu	and Contribution.	Added	to Fees
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	PD MOORE, BARRY L 6100 PHEASANT RIL PORT ORANGE FL 3		□ Delete	11. TITLE NAME STREET ADD	·	ADDITIONS/CHA	NGES TO OFFICERS /	AND DIRECTOR: ☐ Change	S IN 11 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MOORE, THEODORE 2028 OAK MEADOW SOUTH DAYTONA F	E K 'S CIRCLE	☐ Delete	TITLE NAME STREET ADI CITY-ST-Z				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME _STREET ADI CITY-ST-Z				☐ Change	Addition
ITITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADI CITY-ST-Z				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADD CITY-ST-2				☐ Change	Addition -
TITLE NAME STREET AODRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADD CITY-ST-Z	I			☐ Change	☐ Addition

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.

APR 2 3 2003

SIGNATURE: BARKASUA MOORE PURES

SIGNATURE SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

Daytime Phone #