2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P02000025892

1. Entity Name

PHOENIX INDUSTRIES, INC.



FILED Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90976 044 ***150.00

Principal Place of Business 6537 116TH AVE. N. UNIT 1 LARGO FL 33773

Mailing Address 6537 116TH AVE. N. UNIT 1 LARGO FL 33773

2. Principal Place of Business Mailing Address 7000 160× Suite, Apt. #, etc Suite, Apt. #, etc. UNIC CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For ሌድ ሬo 75-3015909 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired ンアビ A ZU Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COLE, ROBERT Street Address (P.O. Box Number is Not Acceptable) 6537 116TH AVE. N. UNIT 1 LARGO FL 33773 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE □ Delete TITLE Cl Channe ☐ Addition SMITH, RUSSELL K NAME NAME PO BOX 2442 **U**FREET ADDRESS STREET ADDRESS CAREFREE AZ 85377 CITY-ST-ZIP CITY-ST-ZIP D۷ TITLE ☐ Delete TITLE Change ☐ Addition COLE, ROBERT NAME NAME STREET ADDRESS 3200 81ST ST. N STREET ADDRESS ST. PETERSBURGH FL 33710 CITY-ST-ZIP CITY-ST-7IP DS TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SMITH, RANDIK NAME 16420 N. THOMPSON PEAK PKWY., STE. 1082 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SCOTTSDALE AZ 85260 CITY-ST-ZIP TITLE DT ☐ Delete TITI F ☐ Change ☐ Addition NAME DEAN, RICHARD L NAME STREET ADDRESS 5907 DASHER CT. STREET ADDRESS CITY-ST-ZIP PORT RICHEY FL 34660 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

2-18-03 727-541-026

☐ Change

Addition