

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 03, 2003 8:00 am**  
**Secretary of State**

02-03-2003 90025 035 \*\*\*158.75

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**DOCUMENT # P02000029607**

1. Entity Name

**THE ORIGINAL CUPCAKE SHOT DRINK COMPANY**



Principal Place of Business

ATTN: DEBBIE CURRIER  
1437 WHOOPING DR  
GROVELAND FL 34736

Mailing Address

ATTN: DEBBIE CURRIER  
1437 WHOOPING DR  
GROVELAND FL 34736



2. Principal Place of Business

*1437 Whooping Drive*  
Suite, Apt. #, etc.

3. Mailing Address

*1437 Whooping Drive*  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

*Groveland FL*

City & State

*Groveland FL*

4. FEI Number

*03-0430581*

Applied For

Not Applicable

Zip

*34736*

Country

*USA*

Zip

*34736*

Country

*USA*

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CURRIER, DEBORAH  
1437 WHOOPING DR  
GROVELAND FL 34736

7. Name and Address of New Registered Agent

Name

*Same*

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

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**

**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

TITLE **CEO** ☐ Delete  
NAME **CURRIER, DEBORAH**  
STREET ADDRESS **1437 WHOOPING DRIVE**  
CITY-ST-ZIP **GROVELAND FL 34736**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President** ☐ Change ☒ Addition  
NAME **JEFF CURRIER, JR.**  
STREET ADDRESS **1437 Whooping Drive**  
CITY-ST-ZIP **Groveland, FL 34736**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Deborah Currier*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*01-11-03 407-758-3088*

CR2E034 (10/02)