## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **FILED** Apr 28, 2003 8:00 am Secretary of State

Principal Place of Business   Sealing Address   Sealing Early   Sealing Address   Sealing April # etc.   Crisco   Cris	DOCUMENT # P02000031584  1. Entity Name BRAATZ ENTERPRISES, INC.				04-14-2003 90096 005 ***150.00		
Sullis, Apt. R. etc.   CHECK HERE IF MAKING CHANGES  City & State   A. FEI Number   Applied For   Registered Agent   Registered	9998 SEMINOLE BLVD.  SEMINOLE FL 33772  SEMINOLE FL 33772						
City & State  A. FE Namber of Status Desired   Repolication	2. Principal Place of Business 3. Mailing Address			, 12-11-11 to 4-114 and 4-114 and 5-114 and 11-11 and 11-11 and 11-11			
E. Name and Address of Current Registered Agent  E. Name and Address of New Registered Agent  FL LYNCH, GARRICK J  8989 SEMINOLE BLVD.  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  FL Zip Code  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rorida. I am terration with, and accept the colligions of registered agent.  SIGNATURE  STREET ADDRESS (P.O. Box Number is Not Acceptable)  FILE NOW!!! FEE IS \$180.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department, 545ate  10. OFFICERS AND DIFFECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 11  TITLE  MAKE  SITER ADDRESS  SITER	Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
Some Andrews of Country  Street Address of New Registered Agent  FL VNCH, GARRICK J 9898 SEMINOLE RUD.  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  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 outget of registered agent.  SIGNATURE  SIGN	City & State		City & State	-		7	
E. Name and Address of Gurrent Registered Agent  LYNCH, GARRICX J 9998 SEMINOLE BLVD.  SEMINOLE R. 33772  City  City  FL  City	Zip	Country	Zip	Country	5 Certificate of Status Desired Status Resired Status Resired	7	
STREET ADDRESS CITY-ST-ZP TITLE TITL		6. Name and Address of Current	Registered Agent				
Sired Address (P.O. Box Number is Not Acceptable)    Sired Address (P.O. Box Number is Not Acceptable)   City   FL   Zip Code	· · · · · ·			Name			
E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rorida. Lam terraliser with, and accept the colligations of registered agent.    City   FL   Zip Code	·			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature   Signat	SEMINOLI	E FL 33772				7	
The collegations of registered agent.    Signature   S				City	FL Zip Code	7	
After May 1, 2003 Fee will be \$55,000 May Be Mark Check Payable to Florida Department of State 10.   St.000 May Be Added to Fees Added to Fe	signature .	ions of registered agent.  Signature, typed or printed name of registered agent			· ·		
TITLE NAME   Delete   TITLE   NAME   Delete   NAME   STREET ADDRESS   CITY-ST-ZIP   Change   Addition   Addition   Change   Change   Addition   Change   Chan	After	May 1, 2003 Fee will be \$550.00	State				
STREET ADDRESS CITY-ST-ZP CARGO, FL 33778 - 1608 CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	10.		The second secon		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	<u> </u>	
CITY-ST-ZP  TITLE NAME SITRET ADDRESS CITY-ST-ZIP  TITLE NAME STRET ADDRESS CITY-ST-ZIP		NEIL BRAATZ	- PT Delete	TITLE	☐ Change ☐ Addition	] 8	
NAME   STREET ADDRESS		_		OTTACE I PUBLICATION		CR2E034 (10/02)	
NAME   STREET ADDRESS	CITY-ST-ZIP	LARGO, FL 3	33778-1609	CITY-ST-ZIP		1 8	
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12. Thereby 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	TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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

GNATURE:

GNATURE:

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