03 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 JAN 14 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000032261

1. Entity Name

FASCINO'S INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
486 Bridgecreek Blvd
Suite, Apt. #, etc.
City & State: Ocoee, Fl
Zip: 34761 Country: USA

3. Mailing Address
2582 S. Maguire Rd.
Suite, Apt. #, etc. 161
City & State: Ocoee, Fl
Zip: 34761 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-064-1976 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Rick Winje
Street Address (P.O. Box Number is Not Acceptable): 486 Bridgecreek Blvd.
City: Ocoee FL Zip Code: 34761

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: Rick Winje — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 1/9/03

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	President
NAME	Lisa Vollmer
STREET ADDRESS	814 Groveshere Loop
CITY-ST-ZIP	Ocoee, Fl 34761
TITLE	Vice President
NAME	Lynn Winje
STREET ADDRESS	486 Bridgecreek Blvd.
CITY-ST-ZIP	Ocoee, Fl 34761
TITLE	BOD
NAME	Rick Winje
STREET ADDRESS	486 Bridgecreek Blvd.
CITY-ST-ZIP	Ocoee, Fl 34761
TITLE	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Rick Winje — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 1/9/03 — Daytime Phone #: 407-654-6216

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