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

## **DOCUMENT #**

P02000032881

1. Entity Name

FORTUNE BARRY, INC.



**FILED** May 05, 2003 8:00 am Secretary of State

05-05-2003 90314 029 \*\*\*150.00

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Suite, Apr. F. etc.   Suite	4465 N. UNIVERISTY DRIVE		11471 W. SAMPLE ROAD. #41				188 11118 11281 (8181	:8171   128   1281		
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Suite. Apt. #, etc.   City & State	•		3. Maning Address							
Name		· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
Country   Say			City & State			4		<u> </u>		
Name	Zip	Country	Zip	Cou	ntry	5	. Certificate of Status Desired			
WONG, ELAINE Y. L.  4465 N. UNIVERSITY DRIVE LAUDERHILL FL 33351  City FL Zip Code  8. 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.  5(GNAXUPE)  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. Abdition Contribution.  P OWN, ELAINE Y. L.  SIREST ADDRESS  OTH 51-2P  OTHER CORAL SPRINGS FL 33351  THE NAME SIREST ADDRESS  OTH 51-2P  OTHER CORAL SPRINGS FL 33351  THE NAME SIREST ADDRESS  OTH 51-2P  THE NAME SIREST ADDRESS  OT		6. Name and Address of Current	Registered Agent			7.	. Name and Address of New Register	ed Agent		
A465 N. UNIVERSITY DRIVE LAUDERHILL FL 33351  City FL Zip Code  City FL Zip Code  8. 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  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Cheek Poyable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS NI 11  THE NOME.  SIREET ADDRESS CITY-SI-2P  CORAL SPRINGS FL 33351  Delee INLE NAME SIREET ADDRESS CITY-SI-2P  Delee INLE NAME SIREET ADDRESS CITY-SI-2P  PARAN, THANH P  8930 STATE ROAD 84, \$263  DAYLE, FL 33324  CHANGES CITY-SI-2P  PARAN, THANH P  8930 STATE ROAD 84, \$263  DAYLE, FL 33324  Change Addition  AME SIREET ADDRESS CITY-SI-2P  THE NAME SIRET ADDRESS CITY-SI-2P						Name				
Elity PL   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 or registered agent.    Signalual liper or pirited rame of registered agent.   In the State of Florida.   In the State of F	•				Street Address (P.O. Box Number is Not Acceptable)					
THE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 After	LAUDERHILL FL 33351									
THE NOWLESS CORY-ST-2P  TILE  NAME  STREET ADDRESS CORY-S					_	•		- L		
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Atter May 1, 2003 Fee will be \$50,00 May Rake Check Payable to Florida Department of State  10.	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
After May 1, 2003 Fee will be \$550,000   Trust Fund Contribution.   Added to Fees    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE   P	FILE NOW!!! FEE IS \$150.00									
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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.