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

## DOCUMENT #

P02000039284

1. Entity Name

R&H CORP. OF PANAMA CITY BEACH



FILED Mar 27, 2003 8:00 am Secretary of State

03-27-2003 90110 042 \*\*\*150.00

						600 W1							
Principal Place of Business 7113 BRANDY WINE DRIVE PANAMA CITY BEACH FL 32407				Mailing Address 7113 BRANDY WINE DRIVE PANAMA CITY BEACH FL 32407						<b>26   ED  </b>   111 <b>0   12</b> 14	1 <b>4 1</b> 1 14 11		
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number 43 - 1972412			Applied For Not Applicable		
Zip Country			Zip Co			ountry			5 Certificate of Status Desired 38.7			75 Additional Required	
6. Name and Address of Current F				egistered Agent			7. Name and Address of New Registered Agent						
SPIEGEL & UTRERA, P.A. 1840 ŞW 22ND ST. 4TH FLOOR							Name Rebecca L. Larson  Street Address (P.O. Box Number is Not Acceptable)  7113 Brandy Wine Dr.						
MIAMI FL 33145							n A Yn	n AMA City Bench FL Zip Code 7					1
the obligations of registered agent.  SIGNATURE  SIGNATURE												d accept	
1.39	Signature typed	or printed name of registered agent a	nd title if appl	licable. (NOTE:	Registere	d Agent signatu	re required	when rei	instating) D	ATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of				State								.00 May Be ed to Fees	
10.		OFFICERS AND D	DIRECTO	RS	11.			AD	DITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN	V 11	]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7113 BRA	REBECCA L NDY WINE DRIVE CITY BEACH FL 32407		Delete						☐ Chan	ge [	Addition	E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		RRY M NDY WINE DRIVE CITY BEACH FL 32407		☐ Delete				•		Chan	ge [	Addition	680
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						Chan	ge [	Addition	
TITLE NAME				Delete	TITLE					☐ Chan	ge [	Addition	

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

**SIGNATURE:** 

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

1.8.03

850-236-1222 Daytime Phone #

Change

☐ Addition