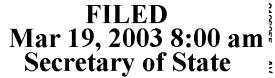
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P02000047381 **DOCUMENT#**



1. Entity Name 11231 NPE	PROPERTIES, INC.				03-19-2003 9	0102 03	7 ***150	.00	
Principal Place 177 US HWY. (TEQUESTA FL	ONE	Mailing Address 177 US HWY. ONE TEQUESTA FL 33469							
2. Principal Pla	ace of Business	3. Mailing Address	S. HilaH	way /		12111 80111 010		P18) 161 88	
Suite, Apt. #, etc.		Suite, Apt. #, etc. #25	# 251		CHECK HERE IF MAKING CHANGES				
City & State		City & State TEQ VESTA		4. [03-0450625 Not Applicable				
Zip	Country	Zip FL	Country USA		Certificate of Status Desired	<u> </u>	ee Required		
	6. Name and Address of Current	Registered Agent		7. N	lame and Address of New Reg	istered A	gent		
			Name						
KRASKER, PAUL A ESQ. 625 N. FLAGER DR., 9TH FLOOR				Street Address (P.O. Box Number is Not Acceptable)					
	BCH FL 33401								
	BOTT 1 E 30401		City	-		Applied For Not Applicable			
8. The above	named entity submits this statement fo	or the purpose of changing its	s registered office or r	egistered ag	ent, or both, in the State of Flori	da. I am fa	miliar with,	and accept	
, and obligati									
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOT	TE: Registered Agent signatur	e required when re	sinstating)	DATE			
	ILE NOW!!! FEE IS \$150.00			<u>.</u>	9. Election Campaign Fina	ncing	\$5.0	O Mav Be	
After May 1, 2003 Fee will be \$550.00					Trust Fund Contribution.		Added	to Fees	
Make Check Payable to Florida Department of State					j				
Make Check			144	ΔΓ	DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
10.	OFFICERS AND	DIRECTORS	11.	A	DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
TITLE	OFFICERS AND		TITLE	AΓ	DITIONS/CHANGES TO OFFIC	CERS AND		_	
10. TITLE	OFFICERS AND D ALIANIELLO, JEFFREY	DIRECTORS		AC	DITIONS/CHANGES TO OFFIC	CERS AND		_	
TITLE	OFFICERS AND	DIRECTORS	TITLE NAME	AE	DITIONS/CHANGES TO OFFIC	CERS AND		Addition	
10. TITLE NAME STREET ADDRESS	OFFICERS AND D ALIANIELLO, JEFFREY 177 US HWY. ONE	DIRECTORS	TITLE NAME STREET ADDRESS	AE	DITIONS/CHANGES TO OFFIC			_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D ALIANIELLO, JEFFREY 177 US HWY. ONE	DIRECTORS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AE	DITIONS/CHANGES TO OFFIC	J	☐ Change	Addition	
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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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP