2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

FILED May 05, 2003 8:00 am Secretary of State 03-21-2003 90120 011 ***150.00

Daytima Phone #

1. Entity Nar		RPORATED OF BRA	V DENT		03 2	1 2003 90120 011	130.00
•	ce of Business TREET COURT WEST FL 34210	Mailing Address 4461 87TH STREET COUR BRADENTON FL 34210	461 87TH STREET COURT WEST		55037921		
Principal Place of Business 3. Mailing Ad			ng Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK	HERE IF MAKING CHANGES	3
City & Sta	te	City & State			4. FEI Number 03 -045	1659	opplied For lot Applicable
Zip Country		Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent			
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST,				Street Address (P.O. Box Number is Not Acceptable) STREET COURT WEST.			
4TH FLOO		Ì	1761		1 60021 602		
MIAMI FL 33145 The above named entity supmits this statement for the purpose of changing its re-			registere	City BRA		FL Zip Co	12/0
the obliga	tions of registered agent.	a All	D_		oo agera, oo oon, iir iiro oaaro	OFFICEROR. 1 OFFICERED WITH	. and accept
•	Signature, prood or subject perne of registered agent	And title if applicable. (NOTI	E: Registered	Agent signature required	when reinstating)	DATE	
Afte	TILE NOW!!! FEE IS \$150.00 If May 1, 2003 Fee will be \$550.00 It Payable to Florida Department of			The second section	9. Election Campai Trust Fund Contr	· · · — +-··	00 Mãy Berala d to Fees
10. OFFICERS AND DIRECTORS			11.	<u> </u>	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	IS IN 11
TITLE	PTD Delete		TITLE		ADDITIONS/OHANGES TO	Change	
NAME STREET ADDRESS CITY-ST-ZIP	1461 87TH STREET COURT WEST		NAME STREET CITY-S	T'ADDRESS			CRZE034 (10/02)
TITLE NAME STREET ADDRESS GITY-ST-ZIP	SVD ELKINS, CHRISTINA 4461 87TH STREET COURT WES BRADENTON FL 34210	☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS		☐ Change	Addition 8
TITLE NAME		☐ Delete	TITLENAME_			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP		STRI		I ADDRESS ST-ZIP		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	TADORESS ST-ZIP		☐ Chan ge	Addition
TITLE NAME STREET ADDRESS.		☐ Delete	~~~	ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	CITY-S TITLE NAME STREET	ADDRESS		Change	Addition
12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for true and accurate and that m	the exem	ption stated in Sec	ction 119.07(3)(i), Florida Statu ame legal effect as if made ur	utes. I further certify that the inder oath; that I am an officer	nformation 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.