

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

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90077 003 ***150.00

02502034 AV

DOCUMENT # P02000052447



1. Entity Name
STUBBS ENTERPRISES, INC.

Principal Place of Business
**1001 NW 83 STREET
MIAMI FL 33150**

Mailing Address
**1001 NW 83 STREET
MIAMI FL 33150**

JUL 1 1 3 10



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

01-0702184

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LUGO, LISA Q
1001 NW 83 STREET
MIAMI FL 33150**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Lisa Q Lugo
(Signature, typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	STUBBS, BETTY	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	<input type="checkbox"/> Delete
NAME	STUBBS, ELLEN	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D / S	<input type="checkbox"/> Delete
NAME	DAWKINS, VELMA	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMITH, FLORRIE	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	<input type="checkbox"/> Delete
NAME	STUBBS, WINSTON	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	D	<input type="checkbox"/> Delete
NAME	STUBBS, RICKY	
STREET ADDRESS	1001 NW 83 STREET	
CITY-ST-ZIP	MIAMI FL 33150	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Meredith Hunter	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Edward Forcer	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Taurus Stubbs, Sr.	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Tamika Dawkins	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	
TITLE	D/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Shenika Peugeot	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael Knight	
STREET ADDRESS	1001 N.W. 83 Street	
CITY-ST-ZIP	Miami, FL 33150	

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.

SIGNATURE:

Lisa Q Lugo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/03
Date

305-725-6498
Daytime Phone #

CR2E034 (10/02)

Attachment
PO2000552447

90017448

10. Officers and Directors Cont.

TITLE Deacon
NAME Jason Stubbs
STREET ADDRESS 1001 N.W. 83 Street
CITY-ST-ZIP Miami, FL 33150

TITLE P/D
NAME Lisa Q. Lugo
STREET ADDRESS 1001 N.W. 83 Street
CITY-ST-ZIP Miami, FL 33150

TITLE Doy
NAME Joyce Ware
STREET ADDRESS 1001 N.W. 83 Street
CITY-ST-ZIP Miami, FL 33150

TITLE
NAME Rhonda Rowe
STREET ADDRESS 1001 N.W. 83 Street
CITY-ST-ZIP Miami, FL 33150

TITLE D
NAME Donna Tatum
STREET ADDRESS 1001 N.W. 83 Street
CITY-ST-ZIP Miami, FL 33150

* All additions