

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

03-24-2003 90159 044 ***150.00

DOCUMENT # P02000053609

1. Entity Name
ELIZABETH KESSLER SALES, INC.



Principal Place of Business
2610 N 38TH AVE
HOLLYWOOD FL 33021

Mailing Address
2610 N 38TH AVE
HOLLYWOOD FL 33021



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
2610 N. 38 AVE
Suite, Apt. #, etc.

3. Mailing Address
2610 N. 38 AVE
Suite, Apt. #, etc.

City & State
Hollywood FL
Zip 33021 Country BROWARD

City & State
Hollywood FL
Zip 33021 Country BROWARD

4. FEI Number
073671239

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KESSLER, ELIZABETH
2610 N 38TH AVE
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name N/A

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

City

FL

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 of, registered agent.

SIGNATURE

Elizabeth Kessler
Signature, typed or printed name of registered agent and title if applicable.

President
(NOTE: Registered Agent signature required when reinstating)

Jan 13 2003
DATE

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

TITLE
NAME DPTS
STREET ADDRESS KESSLER, ELIZABETH
CITY-ST-ZIP 2610 N 38TH AVE
HOLLYWOOD FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ 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.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth Kessler
Date
Daytime Phone #

April 3, 2003
954 962 6773

CR2E034 (10/02)