

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

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90157 033 ***150.00

DOCUMENT # P02000056306

1. Entity Name
U Expansion, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Melbourne

Suite, Apt. #, etc.

3. Mailing Address

2462 Chapparral Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Melbourne FL.

City & State

4. FEI Number

03-0450194

☒ Applied For
☐ Not Applicable

Zip

32934

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

U Expansion, Inc.

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

2462 Chapparral Drive

City

Melbourne

FL

Zip Code

32934

**DO NOT WRITE
IN THIS SPACE**

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

Joanne Corby

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/27/03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	STREET ADDRESS	CITY - ST - ZIP
President	Joanne Corby	2462 Chapparral Drive	Melbourne, FL 32934

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Joanne Corby

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joanne Corby

President

Date

3/27/03

Daytime Phone #

321-259-9003

CR2E034B (12/02)