

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90146 015 ***150.00

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



DOCUMENT # P02000058420

1. Entity Name
BRASS & MORE, INC.

Principal Place of Business
 6476 SUGAR TREE DR.
 SPRING HILL, FL 34607

Mailing Address
 6476 SUGAR TREE DR.
 SPRING HILL, FL 34607

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 City & State

Zip
 Country



CHECK HERE IF MAKING CHANGES

4. FEI Number
03-0443668

Applied For
 Not Applicable

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
KLIMIS, GEORGE N 23 EAST TARPON AVE. TARPON SPRINGS, FL 34689	Name BOHACH-BALVICH, NATALIE Street Address (P.O. Box Number Is Not Acceptable) 6476 SUGAR TREE DRIVE City SPRING HILL FL Zip Code 34607

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: *Natalie Bohach-Balvich* DATE: *3/14/03*

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	D BOHACH-BALVICH, NATALIE 6476 SUGAR TREE DR. SPRING HILL, FL 34607	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S/T BOHACH-BALVICH, NATALIE 6476 SUGAR TREE DRIVE SPRING HILL, FL 34607
	<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Natalie Bohach-Balvich* **NATALIE BOHACH-BALVICH** DATE: *3/14/03* DAYTIME PHONE #: *352 596-7330*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2034 (10/02)