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

DOCUMENT # 80200060487

MiResource Tax



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

07-07-2003 90305 001 ***150.00

Palm City FL Zip Country 5. Certificate of Status Desired	
Suite, Apt. #, etc. City & State Palm City The Country S. Certificate of Status Desired \$8.75 / See Requ 7. Name and Address of Current Registered Agent Name In Atly T. Reilly Street Address (P.O. Box Number is Not Acceptable) 2570 S.W. Mayacao Way 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and the if applicable (NOTE Registered Agent signature required when reindating) DATE January 1: May 1: Fee its \$150.00 After May	Not Applicable Additional
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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:

SIGNING OFFICER OR DIRECTOR