Applied For

## **FILED** Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90149 015 \*\*\*150.00

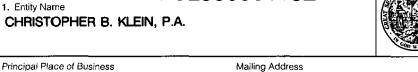
## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

P02000061192 **DOCUMENT #** 

2228 NE 123 ST

City & State

N MIAMI FL 33181



Mailing Address 23045W 2. Principal Place of Business Suite, Apt. #, etc.

2228 NE 123 ST

N MIAMI FL 33181

City & State

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| <b>}            </b> |                                 |             |                  |  |
|                      |                                 | <b>    </b> |                  |  |

CHECK HERE IF MAKING CHANGES

4. FEI Number

| TOT LAURIE CONTENT LUIT PAR  | -> Fort Lauderdale   | , torida       | 04-3693650   | Not Applicable              |  |  |  |  |  |
|--|--|----------------|--|-----------------------------|--|--|--|--|--|
| Zip Country Country  | ZipZip   | Country        | = 5.=Certificate of Statue Desired   | \$8.75 Additional           |  |  |  |  |  |
| 5308()   | 21e5 5225  | United Sta     | 2 S S S S S S S S S S S S S S S S S S S  | Fee Required                |  |  |  |  |  |
| 6. Name and Address of C   | Current Registered Agent   |                | 7. Name and Address of New Registered  | Agent                       |  |  |  |  |  |
| KLEIN, CHRISTOPHER B<br>2228 NE 123 ST   |  | Name K         | dress (P.O. Box Number is Not Acceptable)  |                             |  |  |  |  |  |
| N MIAMI FL 33181   |  | 25 A           | 4 514 10 14  |                             |  |  |  |  |  |
| N MIAMI EL 33161   |  | 230            | 4 SW 18 Ave.   |                             |  |  |  |  |  |
| 9  |  | City           | of Landerdale, Elonida Fl  | L Zip Code                  |  |  |  |  |  |
| 8. The above named entity submits his 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  Signature, typesdor printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  |  |                |  |                             |  |  |  |  |  |
| FILE NOW!!! FEE IS \$150. After May 1, 2003 Fee will be \$5 Make Check Payable to Florida Departr  | .00  |                | 9. Election Campaign Financing   | \$5.00 May Be               |  |  |  |  |  |
| 10. OFFICEF  | RS AND DIRECTORS   | 11.            | ADDITIONS/CHANGES TO OFFICERS AN   | ID DIRECTORS IN 11          |  |  |  |  |  |
| TITLE D  | ☐ Delete   | TITLE          | \ <b>b</b>   | Change                      |  |  |  |  |  |
| NAME KLEIN, CHRISTOPHER B  |  | NAME K         | lein, Christopher B-   |                             |  |  |  |  |  |
| STREET ADDRESS 2228 NE 123 ST  |  | STREET ADDRESS | 2304 SW 18 AV  |                             |  |  |  |  |  |
| CITY-ST-ZIP N MIAMI FL 33181   | •  | CITY-ST-ZIP    | ort Laudentale, florida 33315  |                             |  |  |  |  |  |
| TITLE  | □ Delete   | TITLE          | OF PROPERTY OF THE STATE OF THE | ☐ Change ☐ Addition         |  |  |  |  |  |
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| NAME   | 199 50140  | NAME           |  |                             |  |  |  |  |  |
| STREET ADDRESS   |  | STREET ADDRESS |  | Ì                           |  |  |  |  |  |
| CITY-ST-ZIP  |  | CITY-ST-ZIP    |  | 1                           |  |  |  |  |  |
|  | liad with this filling does not qualify to   |                | d in Section 119.07(3\f) Florida Statutes I further of   | artify that the information |  |  |  |  |  |

Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, Florida Certify that the information indicated on this 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 impowered 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 accurate amount of the report is true and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an accurate an accurate and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an accurate an accurate and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an accurate an accurate and that my name appears in Block 10 or Block 11 if changed in this province in the information in the information