2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000064152 **DOCUMENT #**

1. Entity Name

SIGNATURE:



FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 90225 027 ***150.00

| OFFER COT PROPERTY WAINTENANCE INC. | | | | | | | | |
|---|--|--|---|--|---|--|-----------------------|-----------------------------|
| Principal Place of Business 12430 SW 259TH TERR HOMESTEAD FL 33032 | | Mailing Address 12430 SW 259TH TERR HOMESTEAD FL 33032 | | | I INDIKENI KU DOKE MBIL DEKA NDILI DOMI DELI DE | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | ☐ CHECK HERE IF, MAKING CHANGES | | | |
| City & Stat | е | City & State | | | 4. | FEI Number 56-228/185 | - A _I | oplied For ot Applicable |
| Zip | Country | Country Zip Cou | | itry | 5. | Certificate of Status Desired | 8.75 Ad ee Require | |
| | 6. Name and Address of Current | Registered Agent | | | 7. 1 | Name and Address of New Registered A | gent | |
| TURNER, GILBERT | | | | Name | | | | |
| 12430 SW 259TH TERR HOMESTEAD FL 33032 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| HOMESTEAD FE 33032 | | | | City | FL Zip Code | | | le |
| 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 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | |
| | Signature, typed of printed marke of registered agent | and their applicable. (NOT | E. Registere | d Agent signature required | WILEST | eristating) | | |
| F After Make Check | | | 9. Election Campaign Financing Trust Fund Contribution. | | 00 May Be d to Fees | | | |
| 10. 💛 | OFFICERS AND | DIRECTORS | 11. | | ΑC | L DDITIONS/CHANGES TO OFFICERS AND | DIRECTOR | S IN 11 |
| | D | Delete | TITLE | <u> </u> | | | ☐ Change | Addition |
| NAME STREET ADDRESS CITY ST-ZIP | TURNER, GILBERT 12430 SW 259TH TERR HOMESTEAD FL 33032 | | | EET ADORESS - ST-ZIP | _ , _ | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | | | | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Delete | | | | ☐ Change ☐ Add | | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | j | | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | 1 | | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | - 1 | | | ☐ Change | ☐ Addition |
| indicated | on this report or supplemental report is | s true and accurate and that r | ny sianat | ture shall have the s | same I | 119.07(3)(i), Florida Statutes, I further cert legal effect as if made under oath; that I ai ida Statutes; and that my name appears in | n an officer | or director |