

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

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

05-05-2003 90132 006 ***150.00

DOCUMENT # P02000065248

1. Entity Name

WHODATHOUGHT HOLDINGS, INC.



DO NOT WRITE IN THIS SPACE

80109745

2. Principal Place of Business

6890 ATHENA DRIVE

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Lake Worth, Florida

City & State

4. FEI Number

56-2344313

Applied For

Not Applicable

Zip

33463

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

FREDERICK C BRAUN, ESQ

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

950 N. Federal Highway #108

City Pompano Beach

FL

Zip Code

33062

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

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 Director
NAME DAVID ELDER
STREET ADDRESS 5010 SW 11th Place
CITY-ST-ZIP Margate FL 33068

TITLE Director
NAME FRANK BRUNO
STREET ADDRESS 6890 Athena Drive
CITY-ST-ZIP Lake Worth, FL 33463

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**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID ELDER

4-16-03

Date

954 258 5927

Daytime Phone #

CR2E034B (12/02)