2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORTAUBR

Sep 05, 2003 8:00 am Secretary of State P02000079234 DOCUMENT # 09-05-2003 90110 050 ***155.00 1. Entity Name L.S. AUSTIN, INC. Principal Place of Business Mailing Address 921 CORKWOOD ST 921 CORKWOOD ST HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 2. Principal Place of Business 1188 VIA VERONA CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For <u> 22-3862070</u> Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **AUSTIN, LOIS** Street Address (P.O. Box Number is Not Acceptable) 921 CORKWOOD ST IA VERONA HOLLYWOOD FL 33019 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, typed or printed name of registered agent and tate if applicable (NOTE: Registered Agent signature required when reinstating) received FILE NOW!!! FÉE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State · OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change Addition **AUSTIN, LOIS** NAME 921 CORKWOOD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33019 CITY-ST-ZIP DAFSIDENT ☐ Delete □ Change ☐ Addition NAME NAME 7188 VIAUERONA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

Attachment 86

80144301 #P02000079234

LA AUSTIN, CORPORATION 7188 VIA VERONA DELRAY BEACH, FLORIDA 33446

Representing: Freestyle Marketing

To:

Uniform Business Report

Division of Corporations

P.O. Box

Please note that I have enclosed a check for \$155.00 to cover 2003 Fee for 2003 Profit Corp. Uniform Business Report (UBR) together with completed Document # P02000079234 and \$5.00 Contribution to Election Trust Fund.

I did not receive the UBR previously and being a recent first time S Corporation Agent (as of July, 2002) I was not familiar with it. I did, however, receive the enclosed Form which is due September 10th. Thank you.

Sincerely yours,

Lois Austin President

Enclosures: 2