2003 FOR PROFIT CORPOSATION UNIFORM BUSINESS REPORT (UBR) **PUSUUUUUUUUUU**

DOCUMENT #

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FILED May 09, 2003 8:00 am Secretary of State

04-17-2003 90224 029 ***150.00

LIGHTHOU	USE BUII	LDING INSPECTIO	ONS, INC	C.							_	
Principal Place of Business 1130 N.W. 3RD AVENUE DELRAY BEACH FL 33444 Mailing Address 1130 N.W. 3RD AVENUE DELRAY BEACH FL 33444									_	13303		
2. Principal Place of Business			3. Mailing Address				i inditudi lit udalu ilsel sesti	i deti motiv 99 in sol	116 18(10 11002	ilität 1011 tuni		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City & State			4.	54-3690535		No	plied For ot Applicable		
Zip Country		Zip			ry		Certificate of Status Desired		8.75 Add ee Require			
	6. Name	and Address of Current	Registere	d Agent		Name -	<u> 7</u>	Name and Address of New	Hegistereo A	geni		
	, BRUCE N						ess (P.O.	Box Number is Not Acceptate	ole)			
	. 3RD AVE			•	ļ							1
DELRAY 8	BEACH FL (33444				City			FL	Zip Cod	e	
		L de this season of	for the our	ose of changing its	registere	nd office or ren	istered a	igent, or both, in the State of		miliar with,	and accept	1
8. The above the obligat	inamed entiti ions of regist	y submits this statement ; tered agent.	or the borb	ose of charging to	, rogiotore	,u	,					
SIGNATURE .	Signature, typed	or printed name of registered agen	n and title if app	Nicable. (NOT	E: Registered	d Agent signature re	quired when	rainstaling)	DATE			
F	ILE NOW!	II FEE IS \$150.00						9. Election Campaign	P:	es o	·Ω n=	
Make Check	r May 1, 201 c Pavable to	03 Fee will be \$550.00 o Florida Department o	of State					Trust Fund Contribu	tion.	Added	May Be to Fees	
Make Check	r May 1, 200 c Payable to	03 Fee will be \$550.00 Florida Department of OFFICERS AND	of State	PRS	11.		A		tion.	Added	to Fees	8
Make Check	Payable to	OFFICERS AND	of State	PRS Delete	TITLE		A	Trust Fund Contribu	tion.	Added	to Fees	10/02)
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.