

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2003 8:00 am**  
**Secretary of State**

05-22-2003 90140 025 \*\*\*150.00

0362979  
AV

**DOCUMENT # P02000080179**

1. Entity Name

**COMPLETING THE CIRCLE INC.**



Principal Place of Business

**8207 NW 70TH ST  
TAMARAC FL 33321**

Mailing Address

**8207 NW 70TH ST  
TAMARAC FL 33321**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**920182128**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**URYSZ, RICHARD  
8207 NW 70TH ST  
TAMARAC FL 33321**

Name

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

City

**FL**

Zip Code

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]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**APRIL 30 / 2003**

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **GEORGE** ☐ Delete  
NAME **GEORGE KARSKI**  
STREET ADDRESS **11410 NW 56 DR #101**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE **DIRECTOR** ☐ Change ☒ Addition  
NAME **GEORGE KARSKI**  
STREET ADDRESS **11410 NW 56 DRIVE #101**  
CITY-ST-ZIP **CORAL SPRINGS, FL, 33076**

TITLE **DIRECTOR** ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **DIRECTOR** ☐ Change ☒ Addition  
NAME **CARINA BETTS**  
STREET ADDRESS **11410 NW 56 DRIVE #101**  
CITY-ST-ZIP **CORAL SPRINGS, FL, 33076**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/03**  
Date

**954-817-6949**  
Daytime Phone #

CR2E034 (10/02)

Attachment

MAY 16, 2003

80120726  
#P02000080179

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE FL.

RE: UBR - COMPLETING THE CIRCLE (P02000080179)

DEAR SIR OR MADAM,

I have just returned from abroad and have  
been late in filing this years UBR.

Enclosed is the completed document.

Apologies for the delay.

Yours truly

George Karski  
Director

954-817-6949