

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Sep 04, 2003 8:00 am
Secretary of State

09-04-2003 90066 026 ***150.00

0098146 AV

DOCUMENT # P02000085280

1. Entity Name
PEFFER, INC.



Principal Place of Business
**600 VIA LUGANO CIRCLE
APT. 203
BOYNTON BEACH FL 33436**

Mailing Address
**600 VIA LUGANO CIRCLE
APT. 203
BOYNTON BEACH FL 33436**



2. Principal Place of Business
3575 QUENTIN AVE
Suite, Apt. #, etc.

3. Mailing Address
3575 QUENTIN AVE
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
BOYNTON BEACH, FL

City & State
BOYNTON BEACH, FL

Zip
33436

Country
USA

4. FEI Number
52-2368564

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**PEFFER, ERIK L
600 VIA LUGANO CIRCLE
APT. 203
BOYNTON BEACH FL 33436**

7. Name and Address of New Registered Agent

Name
Peffer, Erik L

Street Address (P.O. Box Number is Not Acceptable)
3575 QUENTIN AVE

City
BOYNTON BEACH FL Zip Code
33436

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  **Erik Peffer** DATE **8/22/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD PEFFER, ERIK L 600 VIA LUGANO CIRCLE APT. 201 BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Required Peffer** DATE **8/22/03** Daytime Phone # **561-361-0322**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

Attachment
80143775
PO2000085280

To whom it may concern:

I have moved and never received my Division of Corporation renewal notice until recently. Please change my address in your system of 600 Via Lugano Cir to 3575 Quentin Avenue, Boynton Beach, Florida, 33436.

Enclosed is my check for \$150.00 as was for the original amount.

Thank you,

Erik Peffer

