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

P02000089072

WHITE SATIN ENTERPRISES INC.

**DOCUMENT#** 

1. Entity Name

**FILED** May 01, 2003 8:00 am Secretary of State

05-01-2003 90278 020 \*\*\*150.00

	DO NOT WRITE	IN THIS S	SPACE	1	1032331			
2. Principal Place of Business 3. Mailing Address 3.3 MANGO TREE DRIVE 3.3 MANGO T			TREE DRIVE					
Suite, Apt. #. etc.		3330 MANGO TREE DRIVE Suite. Apt. #. etc.			DO NOT WRITE IN THIS SPACE			
City & State E D G E W A	e TER FL	City & State EDGEWATER	FL	4. FEI Number 03 - 0479	<del></del>	Applied For Not Applicable		
Zíp 32141	Country	Zíp 32141	Country US	5. Certificate of Sta	itus Desired 🔲 💲	8.75 Additional se Required		
DO NOT WRITE IN THIS SPACE			Name Street Add	7. Name and Address of Current Registered Agent Name - DUNTON, STEPHEN E Street Address (F.O. Box Number is Not Acceptable) 3 3 0 MANGO TREE DRIVE				
8. The above the obligat	named entity submits this statement to ions of registered agent.		City its registered office or re	EDGEWATER gistered agent, or both, in t	FL he State of Florida. I am fam	Zin Code 3 2 1 4 1		
	Sgnature, typed or printed name of registered agent nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00 Amended UBR Is \$61,25	and title if applicable. (NK	OTE: Reg stored Agant signature :	9. Election	Campaign Financing	\$5.00 May Be Added to Fees		
Make Check 10.	Payable to Florida Department of OFFICERS AND							
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PV DUNTON, STERHEN E 3330 MANGO TREE DR EDGEWATER FL 321	I V E	TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST - DUNTON, CHERYL I 3330 MANGO TREE DR EDGEWATER FL 3214		. TITLE NAME STREET ADORESS CITY-ST-ZIP					
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memory density making information indicated in Section 1.19.07(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 it 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.

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CICNIATURE.	1	·	٠.(

SIGNATURE: SIGNATURE STEPHEN & STEPHEN & OUR TON

4-27-03

386-427-2330

Date

Dayl on Phone #