## **2003 FOR PROFIT CORPORATION**

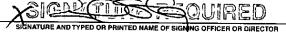
## UNIFORM BUSINESS REPORT (UBR) P02000103063 **DOCUMENT #**



## **FILED** Mar 21, 2003 8:00 am Secretary of State

REVO SERVICES, INC.				03-21-2003 90119 009 ***150.00		
Principal Place of Business 494 NW 52ND AVE. DELRAY BEACH FL 33445		Mailing Address 494 NW 52ND AVE. DELRAY BEACH FL 33445		THE REPORT OF THE PROPERTY OF	KII BRIBA (III) BOKA RHOA IKI KAN	
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 20-000 2378	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registere	d Agent	
SILVA, ROMMEL J			Name	Name		
494 NW 52ND AVE ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
DELRAY I	BEACH FL 33445					
			City	F	L Zip Code	
8. The above the obligation	e named entity submits this statement for tions of registered agent.	or the purpose of changing i	ts registered office or regist	ered agent, or both, in the State of Florida. I ar	n familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	DTE: Registered Agent signature require	ed when reinstating) DATE		
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	f State		Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIBECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SILVA, ROMMEL J 494 NW 52ND AVE.	☐ Delete	TITLE NAME STREET ADDRESS		Change Addition	
TITLE	DELRAY BEACH FL 33445 VD		CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP	NEDERR, TAHENYS J 494 NW 52ND AVE. DELRAY BEACH FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
of the corr		wered to execute this report	iny signature snali nave the	ection 119.07(3)(i), Florida Statutes. I further ce same legal effect as if made under oath; that I 7, Florida Statutes; and that my name appears		

SIGNATURE:



561-495-1184