

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90166 003 ***150.00

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

DOCUMENT # P02000107738

1. Entity Name
NEW CONCEPT, INC.

90142148

Principal Place of Business 1647 SUN CITY CENTER PLAZA SUITE 203A SUN CITY CENTER, FL 33573	Mailing Address 1647 SUN CITY CENTER PLAZA SUITE 203A SUN CITY CENTER, FL 33573
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 6855 E Edgewater Drive Suite, Apt. #, etc. Suite 3C
City & State	City & State Coral Gables, Florida
Zip Country	Zip Country 33133 Miami-Dade



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 45-0489681	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145	7. Name and Address of New Registered Agent Name David Weissman Street Address (P.O. Box Number is Not Acceptable) 6855 E Edgewater Drive Suite 3C City Coral Gables, Florida FL 33133
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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]* DATE 7-11-03

Signature, typed or printed name of registered agent and date of application. (NOTE: Registered Agent signature required when returning.)

	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEISSMAN, EVELYN ☐ Delete 1647 SUN CITY CENTER PLAZA SUITE 203A SUN CITY CENTER, FL 33573	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WEISSMAN, SEYMOUR ☐ Delete 1647 SUN CITY CENTER PLAZA SUITE 203A SUN CITY CENTER, FL 33573	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ 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 807, 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]* Date 7/11/03 813-633-4373

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)

Attachment

90142148

NEW

182000107738

CONCEPT

REAL ESTATE SERVICE

Divisions of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Friday, July 11, 2003

To Whom it may concern:

I am writing this letter to serve as notice that we did not receive the prior notice to file our UBR. I am enclosing the completed UBR form, and a check for \$150.00 the filing fee.

Thank you,


Evelyn Weissman

