## 2003 FOR PROFIT CORPORATION

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

## **FILED** Jul 21, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000117762 DOCUMENT # 07-21-2003 90126 018 \*\*\*150.00 1. Entity Name PHOX GRAPHICS INC. Principal Place of Business Mailing Address 474 NW 49 AVE 474 NW 49 AVE PLANTATION FL 33317 PLANTATION FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number Not Applicable Country \$8.75 Additional 5.\_Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE CREATIONS NETWORK INC. Street Address (P.O. Box Number is Not Acceptable) 941 FOURTH ST MIAMI BCH FL 33139 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition CEPHAS, NEVILLE G NAME NAME 474 NW 49 AVE STREET ADDRESS STREET ADDRESS PLANTATION FL 33317 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE TITLE ☐ Change NATION, SUZANNE C NAME NAME 474 NW 49 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP... PLANTATION FL 33317 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered

NAME

TITLE

NAME

☐ Delete

STREET ADDRESS

STREET ADDRESS

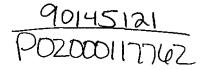
CITY-ST-ZIP

CITY-ST-ZIP

SIGNATUR'

Addition

Attachment



PHOX GRAPHICS INC. 474 NW 49th Ave Plantation, Fl. 33317 EIN# 30-0129464

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302–1500 July 18, 2003

To Whom It May Concern,

Phox Graphics did not receive the prior 2003 uniform business report due between January 1 and May1. We are requesting the late fee of \$400 waived. Enclosed is the completed uniform business report and the original \$150.00 filing fee. Thank you for your attention to this matter. Should you have a questions or concern please don't hesitate to contact us at the above noted address.

Yours Sincerly,

Suzanne Nation (Vice President)

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