FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000125419 1. Entity Name



P02000125419

FILED

03 AUG 29 AN 9 24

NEGGAS, Inc					T. F. S.	SECRETARY OF STATE FALLAHASSEE, FLORIDA			
	DO NOT WRITE	IN T	HIS SPA	ACE		TALLANA.	oode, Ft	.ORIDA	
2. Principal 1975 E S	Place of Business Sunnise Bly	3. Mailing Address					4		
Suite, Apt. #, etc. suite 826		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State Ft Lauderdale FL		City & State			4. FE	O6-1671592		✓ Applied For Not Applicable	
33304	Country broward	Zīp		Country		entificate of Status Desired	Fee	.75 Additional Required	
-	ليان ارات آراميديدي المجيوب	در و غراب ال حسيسة مع الية د		Name	7. Nam Frantz Doug	7. Name and Address of Current Registered Agent Z Douge			
DO NOT WRITE				Stroet Address (P.O. Box Number is Not Acceptable)					-{
	IN THIS SP	ACE		1975 1	1975 E Sunrise Blv Suite 826				
				City Ft	Lauderdale)	FL	Zip Code 33304	
	named entity submits this statement for tions of registered agent.	nt, or both, in the State of Flo	ida. I am fami	liar with, and accept					
SIGNATURE	Muta Dougs	and title if applicable	e (NOTE: Pa	pstered Agent signet	ne required when rein	tisting)	7/17/03	<u> </u>	
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						Election Campaign Fina Trust Fund Contribution	7	\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS		TITLE					ন
NAME STREET ADDRESS CITY-ST-ZIP	CEO & Treasurer Garth Jaramilo 1975 E Sunnise 8/v #826		}	NAME STREET ADDRESS CITY-ST-ZIP					CR2E0348 (12/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Secretary Frantz Douge 1975 E Sunrise Blv #826			TITLE NAME STREET ADDRESS CITY-ST-ZIP					CRZE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		·	an a	TITLE HAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRIT	E	٠.
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE MAME STREET AODRESS CITY-ST-ZIP		IN THIS S	PACI	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		TITLE NAME STREET ADDRESS CITY-ST-ZIP		† 1 78			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling 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 on an attachment with an address, with all other like empowered.

Mond

8/29/2003

Neggas Corp

1975 E. SUNRISE BLVD # 826 FT LAUDERDALE, FL 33304 Phone: 954-523-6979 FAX: 954-523-6984

This fax is to ask to please waive the late fee filing charge for the UBL.

We have moved, did not receive the filing form & need to update our information.