

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2003 8:00 am
Secretary of State

04-28-2003 91443 014 ***150.00

DOCUMENT # P02000130985

1. Entity Name

INSPIRED CREATIONS UNLIMITED, INC.



Principal Place of Business

11802 CLIFFWOOD CT
RIVERVIEW FL 33569

Mailing Address

11802 CLIFFWOOD CT
RIVERVIEW FL 33569

2. Principal Place of Business

11212 St. Andrews Ct.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 89485

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

RIVERVIEW FL

City & State

TAMPA FL

4. FEI Number

194-3090985

Applied For

Not Applicable

Zip

33569

Country

USA

Zip

33689

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SUGGS, ROGER

11802 CLIFFWOOD CT
RIVERVIEW FL 33569

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: P ☐ Delete
NAME: LANGSTON, LANA
STREET ADDRESS: 11802 CLIFFWOOD CT
CITY-ST-ZIP: RIVERVIEW FL 33569

TITLE: VT ☐ Delete
NAME: SUGGS, ROGER
STREET ADDRESS: 11802 CLIFFWOOD CT
CITY-ST-ZIP: RIVERVIEW FL 33569

TITLE: S ☐ Delete
NAME: LANGSTON, LAWRENCE
STREET ADDRESS: 11802 CLIFFWOOD CT
CITY-ST-ZIP: RIVERVIEW FL 33569

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
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CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lawrence Langston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 813-677-0800
Date Daytime Phone

CR2E034 (10/02)

Attachment

55042558
P02000130985

Dear Sir/madame,

Please change our mailing address as
listed on Report Form ATTACHED. Address
has changed since we filed ALSO,

FBI Number is listed.
Sorry for the oversight.

Blessings!

L. Jangston
813-677-0880