## **2003 FOR PROFIT CORPORATION**

UN	IIFORM BUS!	NESS	REPOR	T (L	JBR)		Sep 08, 200	3 8:00	am	
DOCUMENT # P02000131036  1. Entity Name NOTE-BROKERS, INC.						Secretary of State 04-28-2003 90541 048 ***150.00				
Principal Place of Business 6345 GILLETTE AVE COCOA FL 32927			Mailing Address 6345 GILLETTE AVE COCOA FL 32927			75036043				
2. Principal Place of Business 3. Mailing Ac			iling Address	) Address			# [00]  00     1   00  00     1   1   1   1	1000 151 <b>3</b> 1 11011 60101		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAK	ING CHANGES		
City & Sta	te	City	City & State			<b>4.</b> F	6 5 - 11 7 H 1 7 1	\ \ \ <del> </del>	oplied For	
Zip Country		Zip	Zip Cou		гу	5. Certificate of Statu		\$8.75 Add		
	6. Name and Address of C	urrent Register	ed Agent			7. N	Name and Address of New Register	ed Agent		
SOILEAU	TIOHN TO THE TANK	<del></del>			Name		·	`.		
	CHIGAN AVE BLDG C				Street Address (	P.O. B	ox Number is Not Acceptable)			
COCOA							4			
					City			Zip Cod		
	tions of registered agent.		<u>-</u>		d office or register		ent, or both, in the State of Florida. I a	am familiar with,	and accept	
	-		pricable: (NOT	c. negisteret	Agent algustore reduired	whente	einstating) 🛱 🖟 DA1			
After Se	FILE NOW!!! FEE IS \$550.0 eptember 10, 2003 Fee will be k Payable to Florida Departn	\$750.00					Election Campaign Financing     Trust Fund Contribution.		May Be to Fees	
10.		S AND DIRECTO	PRS	11.		AD	DITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTIMINY, PIERRE J 6345 GILLETT AVE COCOA FL 32927				l.		¥, .	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D CUNNINGHAM, CHADWICH 6345 GILLETT AVE COCOA FL 32927	( F	☐ Delete		i		`	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	•	4 -			☐ Change	Addition	
TITLE			☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP					T ADDRESS ST-ZIP		<b>8</b> 6	·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete		T ADDRESS ST-ZIP		ŧ . :	Change	Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREE	T ADDRESS	<u></u>		☐ 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 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

URE REQUIRED

Date

Daytime Phone #

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

4/28/2003-90541-048-\$150.00-\$150.00

Date

Daytime Phone #

<ol> <li>Entity Nan</li> </ol>	MENT # P	02000131036	Est.							
Principal Plac 6345 GILLETT COCOA FL 33		Mailing Address 6345 GILLETTE AVE COCOA FL 32927			55056029					
2. Principal F	lace of Business	3. Mailing Address	3. Mailing Address				<u> </u>		I	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & Stat	е	. City & State	City & State				<del></del>	pplied For ot Applicable	-	
Zip	Country	Zip	Coun	tiy.	5. Certificate of S	tatus Desired	\$8.75 Ad	ditional-	٦.	
	6. Name and Address	of Current Registered Agent	<del></del>		7. Name and Add	ress of New Regis	tered Agent		7	
				Name					7_	
SOILEAU, JOHN L				Street Address (P.O. Box Number is Not Acceptable)						
COCOA F	HIGAN AVE BLDG C L 32922:				· · · · · · · · · · · · · · · · · · ·				1	
	<u>-</u>			City	<del></del>	· ·	FL Zip Coo	je	$\frac{1}{2}$	
		statement for the purpose of chang	ing its registere	ed office or register	ed agent, or both, in	the State of Florida.		and accept	1	
rne colligat	ions of registered agent.						•			
SIGNATURE	Signature, aggled or printed name of r	egistered agent and title if applicable.	(NOTE: Registered	d Agent signature required	( when reinstating)		DATE	<del></del> _	]	
Afte	ILE NOV[!!! FEE IS \$ r May 1 2003 Fee will b c Payating to Florida Dep	e \$550.00				n Campaign Financii und Contribution.		0 May Be d to Fees		
10.	OFF	CERS AND DIRECTORS	11.		ADDITIONS/CHA	NGES TO OFFICER	S AND DIRECTOR	S IN 11	j.	
TITLE NAME STREET ADDRESS CITY-ST-2IP	D Montiminy, Pierre J 6345 Gillett ave Cocoa fl 32927	☐ Delizite	NAME STREET	I			Change	☐ Addition	F024 /10/02	
TITLE NAME STREET ADDRESS CITY-ST-ZP	D CUNNINGHAM, CHADV 6345 GILLETT AVE COCOA FL 32927	VICK F	NAME STREE				Change	Addition	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
TITLE	-	☐ Delete	TITLE	- 1	· · · · · · · · · · · · · · · · · · ·	<u>-                                      </u>	Change	Addition	1	
STREET ADDRESS		And the second second	STREE	T ADDRESS ST-ZIP					= 7	
TITLE	,	☐ Delete	TITLE		<del></del>		☐ Change	☐ Addition		
STREET ADDRESS ,	•		STREE	T ADORESS ST-ZIP	:		•			
me		☐ Delete	TITLE				☐ Change	Addition	(	
NAME STREET ADDRESS CITY-ST-ZIP				T AODRESS ST-21P				•		
TITLE		☐ Celete	TITLE	V1 L#		<del> </del>	☐ Change	Addition		
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP				T ADDRESS ST-ZIP						
Indicated	on this tebort of supplemen	ipplied with this filing does not qual tal report is true and accurate and ustal empowered to execute this re	ify for the exem that my signatu	nption stated in Sec ire shall have the s	ame legal effect as li	' made under oath; ti	hat I am an officer o	or director 1		

ature required