

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90763 018 ***150.00

DOCUMENT # P93000020581

1. Entity Name
49TH PARALLEL CORPORATION



Principal Place of Business
**1917 17TH ST.
SARASOTA FL 34234
US**

Mailing Address
**1917 17TH ST.
SARASOTA FL 34234
US**



2. Principal Place of Business

3. Mailing Address

15 Paradise Plaza
Suite, Apt. #, etc.
#122

15 Paradise Plaza
Suite, Apt. #, etc.
#122

City & State
Sarasota FL

City & State
Sarasota FL

Zip
34239 Country
USA

Zip
34239 Country
USA

4. FEI Number
65-0398500

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCCOOEYE, WAYNE
1917 17TH ST.
SARASOTA FL 34234

Name
Wayne M Cooye
Street Address (P.O. Box Number is Not Acceptable)
15 Paradise Plaza #122
City
Sarasota FL Zip Code
34239

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

3/18/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☐ Delete
NAME
MCCOOEYE, WAYNE
STREET ADDRESS
1917 17TH ST
CITY-ST-ZIP
SARASOTA FL 34234

TITLE
President ☒ Change ☐ Addition
NAME
Wayne M Cooye
STREET ADDRESS
15 Paradise Plaza #122
CITY-ST-ZIP
Sarasota, FL 34239

TITLE
VP ☐ Delete
NAME
MCCOOEYE, JEANETTE
STREET ADDRESS
1917 17TH ST
CITY-ST-ZIP
SARASOTA FL 34234

TITLE
Vice President ☒ Change ☐ Addition
NAME
Jeanette Harris
STREET ADDRESS
918 Contento St
CITY-ST-ZIP
Sarasota, FL 34232

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/03
Date

941-302-6019
Daytime Phone #

CR2E034 (10/02)