2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1/21

FILED Feb 14, 2003 8:00 am Secretary of State

01-21-2003 90114 013 ***150.00

DOCUMENT	# P	9300	005	18	09

1. Entity Name

Principal Place of Business

BOCA RATON FL 33432

454 E. PALMETTO PARK ROAD

SAMPLE MOR	TGAGE	CORPO	DRATION
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Mailing Address 454 E. PALMETTO PARK ROAD BOCA RATON FL 33432

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429 NE 3	29 NE 34th Street 429 NE 34th Street							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & Stat		City & State		4	RS-NADQAAR		oplied For	
	ton, FL	Boca Raton, FL					ot Applicable	
Zip 33431	Country USA	Zip 33431	Country		5. Certificate of Status Desired	\$8.75 Add Fee Require		
33431	6: Name and Address of Current R			7	7. Name and Address of New Registe	red Agent		
Name				Sample				
	WILLIAM D		Street A	ddress (P.C	iam D. Sample ddress (P.O. Box Number is Not Acceptable)			
•	LMETTO PARK ROAD		429	<u>NE 34tl</u>	h Street			
BOCA RA	TON FL 33432							
i		•	City Boca	Raton		FL 33343	1 1	
	named entity submits this statement for	the purpose of changing	its registered office of	r registered	agent, or both, in the State of Florida.	l am familiar with,	and accept	
the obligat	tions of registered agent.				ď		_	
SIGNATURE .	X William D. 2	ample	OTE: Registered Agent signal			01/14/0	<u>3</u>	
	Signature, typed or printed nume of registered agent an	ng title if applicable. (N	QTE: Hegistered Agem signal	ture required whi	en remeasurg)	<u> </u>		
	ILE NOW!!! FEE IS \$150.00				9. Election Campaign Financing	s5.0	00 May Be	
	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State			Trust Fund Contribution.		to Fees	
10.	OFFICERS AND C		11.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	SIN 11	
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NAME	SAMPLE, WILLIAM D		NAME	ļ	•		1	
STREET ADDRESS	454 E. PALMETTO PARK ROAD		STREET ADDRESS	1	E 34th Street	-		
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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 Block 11 if

(561)338-777<u>2</u>