

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90207 010 ***158.75

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DOCUMENT # P93000073987

1. Entity Name

DOLLAR SHACK, INC.



Principal Place of Business

% JUPITER LAW CENTER

4406 NORTHLAKE BLVD

WEST PALM BEACH FL 33410

Mailing Address

% JUPITER LAW CENTER

6390 INDIANTOWN RD #30

JUPITER FL 33458

2. Principal Place of Business

DOLLAR SHACK

3. Mailing Address

DOLLAR SHACK

Suite, Apt. #, etc.

4406 NORTHLAKE BLVD

Suite, Apt. #, etc.

4406 NORTHLAKE BLVD

City & State

PALM BEACH GARDENS FL

City & State

PALM BEACH GARDENS FL

Zip

33410

Country

USA

Zip

33410

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0459370

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUMSON, RICHARD P

6390 INDIANTOWN RD

CHASEWOOD PLZ STE 30

JUPITER FL 33458

7. Name and Address of New Registered Agent

Name

CHABRIA, MAYA

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

18348 Lakebend drive

City

JUPITER

FL

Zip Code

33458

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

Maya Chabria

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 ☐ Delete

D
CHABRIA, MAYA
18348 LAKE BEND DR
JUPITER FL 33458

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ Delete

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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
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NAME
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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:

Maya Chabria
MAYA CHABRIA

2/ /03

624 - 5819

Date

Daytime Phone #

CR2E034 (10/02)