

2000 UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

FILED

00 DEC 28 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94060038398	
Entity Name SPACE COAST LADY, INC.	
Principal Place of Business SPACE COAST LADY, INC. 1869 S. PATRICK DRIVE INDIAN HARBOUR BEACH, FL 32937	Mailing Address 128 Island View Drive INDIAN HARBOUR BEACH, FL 32937

2. Principal Place of Business 1869 S. Patrick Drive Suite, Apt. #, etc.	3. Mailing Address 128 Island View Drive Suite, Apt. #, etc.
City & State INDIAN HARBOUR BEACH, FL Zip 32937 Country U.S.A.	City & State INDIAN HARBOUR BEACH, FL Zip 32937 Country U.S.A.

6. Name and Address of Current Registered Agent MARIA PUZINO 128 ISLAND VIEW DRIVE INDIAN HARBOUR BEACH, FL 32937	
---	--

4. FEI Number 59-3242034	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	DATE (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election, Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	---	---

11. OFFICERS AND DIRECTORS	
TITLE PRESIDENT (sole officer)	<input type="checkbox"/> Delete
NAME Maria Puzino	
STREET ADDRESS 128 Island View Dr	
CITY-ST-ZIP Indian Harbour Bch, FL 32937	
TITLE <input type="checkbox"/> Delete	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME LS	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME 700003536647--8	
STREET ADDRESS -01/16/01--01005--015	
CITY-ST-ZIP ****150.00 ****150.00	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: Maria Puzino	11/20/00 777-5239
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

CR2E034 (9/99)

October 20, 2000 Page 2

To Whom It May Concern
I hope you can help me!

My Corp. name is Space Coast Lady, Inc

My mailing address is 128 Island
View Drive, S.A. B, FL 32937

I have been incorporated since 5/16/94
my FEI # is 59-3242034.

My husband passed away in Aug from
8 months of battling cancer. I
regretted to confirm that our report
was sent out on time. I had
a manager running the business
while I tended to my husband.
I would like to reconcile my
papers. Please, I cannot afford
to pay the amount due. My
absence from the business has
made it decline. Please let me
know how I can get reinstated.
I appreciate your help. Thank You - Maria Pardo