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

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pr 11, 2003 8:00 an	n
Secretary of State	
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Apr 11, 2003 8:00 am
Secretary of State

DOCUMENT # P9400059006  1. Entity Name PARK AVENUE CONSTRUCTION COMPANY				Secretary of State 04-11-2003 90150 033 ***150.00				
507 N. NEW Y SUITE 301 WINTER PARK US	K FL 32789	Mailing Address P.O. BOX 2796 * •WINTER PARK FL 32790 US  3. Mailing Address	7		######################################			
フィー Suite, Apt.	) N. FERNCREEK AVE. #, etc.	Suite, Apt. #, etc.	<u>ر</u>		Сн	ECK HERE IF MAKII	NG CHANGES	
City & Stat	ANDO, FL	City & State	. <u>.</u> <u>-</u>	_	4. FEI Number 59	3261927	<u> </u>	oplied For ot Applicable
zip 3 2	1803 Country USA	Zip	Country		5. Certificate of Statu	s Desired	\$8.75 Add Fee Required	
	6. Name and Address of Current F	Registered Agent			7. Name and Addres	s of New Registere	d Agent	
<b>*</b>			Name	-J-01	HNSON, L-I	SA=A		الت السيا
JOHNSON			Street	Address (F	P.O. Box Number is Not	Acceptable)	4.00	
1303 UTA				192	I WOODCK	EST DRIV	<u>/E</u>	
"ORLANDO	J FL 32803							
("			City	WINT	TER PARK	F	L Zip Code	389
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office			State of Florida. I ar		and accept
8. The above the obligat	e named entity submits this statement for tions of registered agent.		-	or registere	ed agent, or both, in the			and accept
the obligat	e named entity submits this statement for tions of registered agent.		-	or registere	ed agent, or both, in the			and accept
the obligat	e named entity submits this statement for tions of registered agent.	LISA F	-	or registere	PRESIDENT		$\sqrt{07/20}$	and accept
the obligat	tions of registered agent.  Signalare, med or printed name of registered agent are	LISA F	1. Јона	or registere	PRESIDENT	OI/	7 familiar with,	03
the obligat	tions of registated agent.	LISA F	1. Јона	or registere	PRESIDENT when reinstating)  9. Election C	DATE	7 familiar with, 200	03 0 May Be
signature.	signative year or printed name of registered agent as	LISA /	1. Јона	or registere	PRESIDENT when reinstating)  9. Election C	OI/	7 familiar with, 200	03
signature.	Signature. The dor printed name of registered agent as ILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 or Payable to Florida Department of OFFICERS AND CO	LISA / nd title if applicable. (NOTE:	1. Јона	OF registered	PRESIDENT when reinstating)  9. Election C	DATE ampaign Financing Contribution.	7 familiar with, 10 7/20	0 May Be
SIGNATURE FI After Make Check 10.	Signalare, fried or printed name of registered agent at ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of OFFICERS AND D	LISA / nd title if applicable. (NOTE:	A. Joha Registered Agent sign  11.  TITLE	OF registered	PRESTOENT when reinstating)  9. Election C Trust Fund ADDITIONS/CHANC	ampaign Financing Contribution.	7 familiar with, 10 7/20	0 May Be
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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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

REQUESTATA. JOHNSON

☐ Delete

01/07/2003

Change

Addition