2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # POMODORAGA

Artes a



FILED Feb 27, 2003 8:00 am Secretary of State

1. Entity Na A-1 PET	lame		0000000		02-27-200	3 90135 008 ***15	0.00
Principal Place of Business 11190 SPRING HILL DR SPRINGHILL FL 34609 US			Mailing Address 1421 EXOTIC AVENUE SPRING HILL FL 34609		122/122) (12 /2/14 813) 821		
2. Principal	l Place of Busin	ness	3. Mailing Address				
Suite Ar	pt. #, etc.		Suite, Apt. #, etc.				
					CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 59-3284500 Applied For			
Zip		Country-	Zip	Country		-	Vot Applicabl dditional
	6. Name	and Address of Currer	nt Registered Agent		<u></u>	Fee Requi	red.
			V	Name	7. Name and Address of New	Registered Agent	
ROTHENBERG, THOMAS C				Street Address	ss (P.O. Box Number is Not Acceptal	ala)	
	otic avenui Hill FL 3460			- CHOCK Address	Dox Humber is Not Acceptal		
orning i	FILL PL 3460	15				-	
				City		Zip Co	
8. The above	e named entity	submits this statement	for the purpose of changing its	s registered office or regis	stered agent, or both, in the State of I	Florida I am familiar with	and accont
trie ooliga	ations of registe	ered agent.			garage and any mine example of	Torreat Tarriannia Will	, апо ассері
SIGNATURE							
SIGNATURE	Signature, typed o	or printed name of registered ager	nt and title if applicable. (NOT	TE: Registered Agent signature requi	lired when reinstating)	DATE	
	Signature, typed o	FEE IS \$150.00		IE: Registered Agent signature requ			
f Afte	Signature, typed of)	TE: Registered Agent signature requ	olired when reinstating) 9. Election Campaign F Trust Fund Contribut	inancing _ \$5.0	00 May Be
f Afte	FILE NOW!!! er May 1, 200 ck Payable to	FEE IS \$150.00	of State	TE: Registered Agent signature requi	9. Election Campaign F Trust Fund Contribut	Financing \$5.0	d to Fees
Afte Make Chec 10.	Signature, typed of FILE NOW!!! er May 1, 200 ck Payable to	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department OFFICERS AND	of State		9. Election Campaign F	Financing \$5.0	d to Fees
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF SIGNING OFFICER OR DIRECTOR

(352)666 - 7001 Daytime Phone #