2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P94000093273

1. Entity Name

CBB CONSULTANTS, INC.

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

04-24-2003 90172 034 ***150.00

1				1	100					
Principal Place of Business 1625 SE 17TH STREET FORT LAUDERDALE FL 33316		Mailing Address 1625 SE 17TH STREET FORT LAUDERDALE FL 33316								
2. Principal P	Place of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Stat	e	City & State				4. FEI Number 65-05	551664		oplied For ot Applicable	
Zip	Country	Zip	Cour	ntry		5. Certificate of Status D		\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent				7. Name and Address of	f New Registered A	gent	_ =	
				Name	Theodore M. Moses					
	THEODORE M			Street Ac						
1500 CO	RDOVA RD., #300				162	(P.O. Box Number is Not Acceptable) 525 S.E. 17th Street				
FORT LA	UDERDALE FL 33316			,					•	
				City	Ft	Lauderdale	FL	Zip Cod 333	16	
	named entity submits this statement for	r the purpose of changing it:	s register	ed office or	registere	ed agent, or both, in the Sta	ate of Florida, 1 am f	amiliar with,	and accept	
the obligat	ions of registered agent.									
SIGNATURE.	SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	RE MONTH FEE IO 6450 00									
	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00					9. Election Camp			O May Be	
	Payable to Florida Department of	State				Trust Fund Co	ntribution.	l Added	to Fees	
10.	OFFICERS AND		11.			ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTOR	S IN 11	
TITLE	PD :	Delete		E		ABBITIONO/ONANGEO		Change	Addition	
NAME	MOSES, THEODORE M	C Delete	NAM	- 1	PD	1. 2/ 2/		g		
STREET ADDRESS	1500 CORDOVA RD., #300		STRE	EET ADDRESS		eodore M. Moses	_		ļ	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316		CITY	-ST-ZIP		625 S.E. 17th Street t Lauderdale, FL 33361				
TITLE	VD .	XX Delete	TITU	E	SD	Lauderdale, ri	7 22201	☐ Change	Addition XX	
NAME	SMITH, DANIEL L		NAM			nes R. Welch)	
STREET ADDRESS	1500 CORDOVA RD., #300			ET ADDRESS		25 S.E. 17th S	te De Tauda	-1-1-	100 C 101	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316		CITY	-ST-ZIP		23 3.6. 17(11 5)				
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NAME STREET ADDRESS	PEARSON, BROWNE 1500 CORDOVA RD., #300	-	NAM	ET ADDRESS		owne Pearson			1	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316			-ST-ZIP		25 S.E. 17th St			}	
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NAME			NAM			ristian Duhaime	_	C_1 change	17 Wagner	
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NAME STREET ADDRESS			NAM etre	E Et address					-	
CITY-ST-ZIP	,			-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: .

Theodore M. Moses President

4-22-03