2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P95000014939 **DOCUMENT #** 1. Entity Name



THE BOL	D LOOK, INC.				0117 2003 902	15015 15	0.00
Principal Place of Business 2285 NW 150 ST MIAMI FL 33054 US		Mailing Address 171 SW 121 TERRACE CORAL SPRINGS FL 33071 US			8888 JAN 8888 1888		
2. Principal Place of Business		3. Mailing Address		- -			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 65-0551883 Applied For Not Applicable		
Zip Country		Zip	p Country		5. Certificate of Status Desired	\$8.75 44	ditional
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent		
				Name			
BOLD, JANET				Street Address (P.O. Box Number is Not Acceptable)			
171 SW 1	21 TERR						
CORAL SPRINGS FL 33071							
				City Zip Code			e
	tions of registered agent.				ed agent, or both, in the State of Florida.		and accept
	Signature, typed or printed name of registered ager	at and title if applicable.	(NOTE: Registered	d Agent signature required	when reinstating)	ATE	,
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department				Election Campaign Financing Trust Fund Contribution.		May Be I to Fees
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOLD, KENNETH 171 N.W. 121 TERRACE CORAL SPRINGS FL 33065	☐ Delete	TITLE NAMI STRE			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l		☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete		1		☐ Change	Addition

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: