FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State
04-30-2003 90127 036 ***150.00

DOCUMENT # **P95000017981**

1. Entity Name
COCKNEY REBEL, INC.

DO NOT WRITE IN THIS SPACE

11029315

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10793 49th Street North	10793 49th Street North
Suite, Apt. # etc. Unit C	Suite, Apt. # etc. Unit C
City & State Clearwater, Florida	City & State Clearwater, Florida
Zip 33762 Country U.S. A.	Zip 33762 Country U.S. A.

4. FEI Number 593299926 ☐ Applied for ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Terrance F. Brabant

Street Address (P.O. Box Number is Not Acceptable): 211 55th Avenue

City: St. Petersburg FL Zip Code: 33706

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 (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 may be added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Brabant, Terrance F. 211 55th Avenue St. Petersburg, Florida 33706 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Brabant, Taina 211 55th Avenue St. Petersburg, Florida 33706 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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.

Cockney Rebel, Inc.

SIGNATURE: By: _____ Terrance F. Brabant (727) 363-8462
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #