2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P95000027374 **DOCUMENT #**

1. Entity Name



FILED Mar 20, 2003 8:00 am § Secretary of State

VAN AND MARIE, INC.							
Principal Place of Business Mailing Address 10676 NW 48TH ST CORAL SPRINGS FL 33076 Mailing Address CORAL SPRINGS FL 33076				I I BRIGARIA (AR ABIRA BIRA) BRANA BA		1	UN CICL INC
Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.				. CHECK HERE IF MAKING CHANGES			
City & State City		ty & State		4. FEI Number 65-0573303 Applied For Not Applical			
y Zip	,	Country		5. Certificate of Status Desired		8.75 Ad	ditional
ress of Current Register	ed Agent			7. Name and Address of New	Registered Ag	ent	
		Na	me				•
WEINER, MARIE 10676 NW 48TH ST			Street Address (P.O. Box Number is Not Acceptable)				
		<u> </u>		<u>'</u>			
		Cit	у		FL	Zip Cod	е
this statement for the purp nt.	oose of changing its	registered off	ice or registere	ed agent, or both, in the State of F	lorida. I am far	niliar with,	and accept
ne of registered agent and title il ap	plicable (NOT	E: Registered Agent	signature required v	when reinstating)	DATE		
S 61EU UU	<u> </u>		<u> </u>				
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							0 May Be I to Fees
OFFICERS AND DIRECTO	DRS	11.		ADDITIONS/CHANGES TO OF	FICERS AND D	RECTOR	3 IN 11
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	this statement for the purent. this statement for the purent. \$	3. Mailing Address Suite, Apt. #, etc. City & State Y Zip Iress of Current Registered Agent this statement for the purpose of changing its nt. The of registered agent and title II applicable. (NOT \$\$150.00 pepartment of State OFFICERS AND DIRECTORS Delete T. 33076 Delete Delete Delete	3. Mailing Address Suite, Apt. #, etc. City & State y Zip Country Iress of Current Registered Agent Na Str Cit this statement for the purpose of changing its registered offint. S\$150.00 rill be \$550.00 Department of State OFFICERS AND DIRECTORS 11. Delete TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP Delete TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR STREET ADDR STREET ADDR CITY-ST-ZIP TITLE NAME STREET ADDR STREET	3. Mailing Address Suite, Apt. #, etc. City & State Y Zip Country Iress of Current Registered Agent Name Street Address (F City this statement for the purpose of changing its registered office or registered to registered agent agent and title if applicable \$ \$150.00 III be \$550.00 Department of State	3. Mailing Address Suite, Apt. #, etc. Chy & State City & State Country Zip Country Tress of Current Registered Agent City Street Address (P.O. Box Number is Not Acceptable City Street Address (P.O. Box Number is Not Acceptable City City This statement for the purpose of changing its registered office or registered agent, or both, in the State of File. City Cit	3. Mailing Address Suite, Apt. #, etc. CHECK HERE IF MAKING O City & State 4. FEI Number 65-0573303 Y Zip Country 5. Certificate of Status Desired \$\frac{1}{2}\text{FL}} Tress of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.C. Box Number is Not Acceptable) City FL This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered agent, or both, in the State of Florida. I am fair in. This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am fair in the	10076 MV 43TH ST CORAL SPRINGS FL 30076 3. Mailing Address Suite, Apt. #, etc. City & State City & State On Status Desired Search Agent Street Address (P.O. Bow Number is Not Acceptable) City FL Zip Cod This statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, it. S \$150.00 Ill be \$50.00 Dill be \$50.00 Dippartment of State OFFICERS AND DIRECTORS TILE NAME SIRET ADDRESS CITY -51.2P Delete TILE NAME SIRET ADDRESS CITY -51.2P Delete TILE NAME SIRET ADDRESS CITY -51.2P Delete TILE NAME SIRET ADDRESS CITY -51.2P Change Change SIRET ADDRESS CITY -51.2P Change NAME SIRET ADDRESS CITY -51.2P Change SIRET ADDRESS CITY -51.2P Ch

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 of the corporation of the receiver of trustee empowered.

SIGNATURE:

WE1-19/

368-8040