## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Jul 01, 2002 8:00 am Secretary of State

	NT # P95000	029322		07-01-2002 903	352 015 ***150.00	
1. Entity Name Linda Snyder Yacht Interiors, Inc						
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en en sen sen se			AUE			
2. Principal Place of	Business E Ridexwind	3. Mailing Address Y 18/70 SE	Ridgeviin D			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SE	ACE	
City & State	ra fl	City & State Teamer sta	, Fi	4. FEI Number 65-0569424	Applied For Not Applicable	
33469	Country USA	zip 1 33469	Country		8.75 Additional ee Required	
	a vijekski		Name I L	7. Name and Address of Current Registered	Agent	
DO NOT WRITE			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
	IN THIS SP			/ OV NALME (ALLESS 143)		
	ale particular de la Proposition de la companya de La companya de la co		City Tequ		33969	
<ol><li>The above name</li></ol>	d entity submits this statement for	the purpose of changing its	registered office or registe	red agent, or both, in the State of Florida.	· .	
SIGNATURE - Signatur	e, typed or printed name of registered agent ar	nd title if applicable. (NO It.	Registered Agent signature require	d when remaining) DATE.		
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  After May 1. Fee it \$150.00  After May 1. Fee it \$550.00  Trust Fund Contribution.  Trust Fund Contribution.						
(See criteria on b	pack)	Male Check Payeb	USR (* 28° 75 - 1 le to Department of Sta	Trust Fund Contribution.	Added to Fees	
TITLE DPS L	officers and co	<u> </u>	ing.		2/01)	
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. TITLE NAME			HAME SEE			
STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	production of the second	Cary Struct 8.2			
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 the true same legal effect as if made under earl; that I am an officer or director of the corporation or the receiver or stustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other-like empowered.						
SIGNATURE:						