2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P95000037716



FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90232 007 ***150.00

BETH & COMPANY, INC.							ŭ -	.				
Principal Place of Business 7212 25TH DRIVE WEST BRADENTON FL 34209 Mailing Address 7212 25TH DRIVE WEST BRADENTON FL 34209 BRADENTON FL 34209					. I							
Principal Place of Business 3. Mailing Address			Address			1		LEISE Ed ini di eise	H1111 1111 1			
Suite, Apt. #	, etc.	Suite, Ap	Suite, Apt. #, etc.				☐ CHE	CK HERE IF	MAKING	CHANGES	; 	
City & State		City & St	City & State			4. F		65-0585621			Applied For Not Applicable	
Zip Country		Zip	Zip Cou		5.		ertificate of Status			\$8.75 Ac Fee Requir		
	6. Name and Address of Curre	nt Registered A	gent			7. N	ame and Addres	s of New Re	gistered	Agent		
	2	ميسر	. سوس ادر		-Name				•			
	BETH ANN DRIVE WEST				Street Addre	ess (P.O. Bo	ox Number is Not	Acceptable)				
	ON FL 34209										[
	,				City		 -		FL	_		
the obligation	named entity submits this statemer ons of registered agent. Signature, typed or printed name of registered as				d Agent signature re				DATE		·	
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550. Payable to Florida Departmer	00 It of State						Contribution	ı. [☐ Add	00 May Be ed to Fees	
10.	OFFICERS A	ND DIRECTORS		11.		AD	DITIONS/CHANG	ES TO OFFI	CERS AN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOUDERS, BETH ANN 7212 25TH DRIVE WEST BRADENTON FL 34209		☐ Delete			٠				Change	Aquidon	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIADLITION I L 04200		☐ Delete							☐ Chang	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	المراجع المتعلق		Delete				الياس	. = 1,2	*****	Chang	e Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		- 	☐ Delete							☐ Chang	e 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		AL I	☐ Delete		I .			<u></u>		☐ Chang	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Market Office	☐ Delete	CIT	ME REET ADDRESS Y-ST-ZIP	Lin Section	ı 119.07(3)(i), Flori	da Statutes.	I further o	Chang	·	

12. I hereby certify that the information supplied with this filling 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.

941 745-2585

Daytime Phone #