

ق-ستجاری

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91527 048 \*\*\*150.00

**DOCUMENT #** P95000067335  
 1. Entity Name  
 United Labor of America, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 2536 Countryside Blvd		3. Mailing Address 2536 Countryside Blvd	
Suite, Apt. #, etc. Sixth Floor		Suite, Apt. #, etc. Sixth Floor	
City & State Clearwater FL		City & State Clearwater FL	
Zip 33763	Country USA	Zip 33763	Country USA

DO NOT WRITE IN THIS SPACE

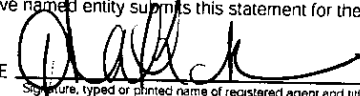
4. FEI Number 59-3333378	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name North, Heather L
Street Address (P.O. Box Number is Not Acceptable) 2536 Countryside Blvd
Sixth Floor
City Clearwater
State FL
Zip Code 33763

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.

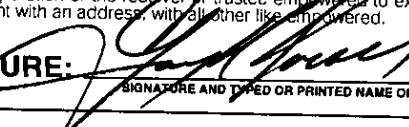
SIGNATURE:  Heather L. North DATE: 4.19.02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Boesch, Gary R 2536 Countryside Blvd 6th Floor Clearwater FL 33763	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like answered.

SIGNATURE:  Gary R. Boesch DATE: 4-19-02 727-726-0726

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)