

FILED
Jun 13, 2002 8:00 am
Secretary of State

05-17-2002 90032 007 ***150.00

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

DOCUMENT # P96000007851

1. Entity Name

Wing + a prayer, inc.

DO NOT WRITE IN THIS SPACE

92693

2. Principal Place of Business

11077 Harbour Springs Cir
Boca Raton FL 33428

3. Mailing Address

11077 Harbour Springs Cir
Boca Raton FL 33428

DO NOT WRITE IN THIS SPACE

Zip Country

Zip Country

4. FEI Number

65-0637555

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name ~~Wing + a prayer, inc.~~ Daniel Cohn

Street Address

11077 Harbour Springs Cir
Boca Raton FL 33428

City

FL Zip Code

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IN THIS SPACE**

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOT I: Registered Agent signature required when retreating)

DATE

4/26/02

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 \$81.25

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

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Director
Daniel Cohn
11077 Harbour Springs Cir
Boca Raton, FL 33428

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
Director
Kenneth S Zeiss
11077 Harbour Springs Cir
Boca Raton, FL 33428

TITLE
NAME
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CITY- ST- ZIP

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IN THIS SPACE**

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 empowered.

SIGNATURE:

[Signature]
Typed or printed name of signing officer or director

4/26/02 561-487-2226