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Mar 27, 2003 8:00 am
Secretary of State

03-27-2003 90093 046 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P96000029208			80064253	
1. Entity Name SOPER CORPORATION				
Principal Place of Business 13964 SHIPWRECK CIRCLE SOUTH JACKSONVILLE, FL 32224		Mailing Address 13964 SHIPWRECK CIRCLE SOUTH JACKSONVILLE, FL 32224		
2. Principal Place of Business SUMMER SANDS SALON Suite, Apt. #, etc. 1483 ATLANTIC BLVD City & State NEPTUNE BCH, FL Zip 32266 County DUVAL		3. Mailing Address 13964 SHIPWRECK Cir. 5 Suite, Apt. #, etc. City & State Jacksonville FL Zip 32224 County DUVAL		
				
		☒ CHECK HERE IF MAKING CHANGES		
4. FEI Number 59-3371200		Applied For Not Applicable		
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SOPER, DEBBIE L 13964 SHIPWRECK CIRCLE SOUTH JACKSONVILLE, FL 32224		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent signature required when missing) DATE				
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: <i>Debbie L Soper</i> March 25, 2003 (904) 568-5361				