

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90352 013 ***150.00

DOCUMENT # P96000032825

1. Entity Name
SLA ENTERPRISES, INC.

Principal Place of Business

**12703 KITTEN TRAIL
HUDSON FL 34669**

Mailing Address

**12703 KITTEN TRAIL
HUDSON FL 34669**

2. Principal Place of Business

**2201 CITRUS VALLEY CIRCLE
Suite, Apt. #, etc.**

3. Mailing Address

**2201 CITRUS VALLEY CIRCLE
Suite, Apt. #, etc.**

City & State

PALM HARBOR FL

City & State

PALM HARBOR FL

4. FEI Number

59-3379152

Applied For

☐ Not Applicable

Zip
34683

Country

U.S.A.

Zip
34683

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SOARES, SIDNEY L
12703 KITTEN TRAIL
HUDSON FL 34669**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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 **PD** ☐ Delete
NAME **SOARES, SIDNEY L**
STREET ADDRESS **12703 KITTEN TRAIL**
CITY-ST-ZIP **HUDSON FL 34669**

TITLE **SD** ☐ Delete
NAME **SOARES, LYNNE E**
STREET ADDRESS **12703 KITTEN TRAIL**
CITY-ST-ZIP **HUDSON FL 34669**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIDNEY L. SOARES

07-09-02

(727) 771 7723

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

P.O. Box 6327
Tallahassee, Florida 32314

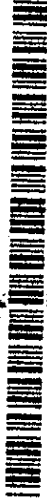
PRESORTED

FIRST-CLASS MAIL

U.S. POSTAGE PAID

FLORIDA DIVISION OF CORPORATIONS

84321



SOAR703 346693181 1701 20 07/07/02
NOTIFY SENDER OF NEW ADDRESS
SOARES
2201 CITRUS VALLEY CIR
PALM HARBOR FL 34683-3104

#03



12703 KITTEN TRAIL
HUDSON FL 34669-1244

Attachment
#796000032825
120589

Not At This Address

Attachment & Black
p96000032825
120589

7/9/02

To whom it may concern,

Our company has moved in the last 7 months and we did not receive the first notice. We would greatly appreciate it if you would accept the the \$150.00 Filing Fee.
Thank you very much.

Sidney Soanes
President

SLA Enterprises, Inc.

(P.S.) enclosed is the mailing -
" notify sender of new address "