

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

DOCUMENT # P96000038197					
1. Entity Name <b>RUBY, INC.</b>					
Principal Place of Business P.O. BOX 823 BOCA RATON, FL 33429 US			Mailing Address P.O. BOX 823 BOCA RATON, FL 33429 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number <b>65-0663220</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DE SIMONE, GEORGE 105 WATERVIEW WAY ROYAL PALM BEACH, FL 33411			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		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 _____ (NOTE: Registered Agent's signature required when remaining)					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%; border: 1px solid black; padding: 2px;"> <p style="font-size: 8px; margin: 0;">FILE NOW! FEE IS \$150.00                      After May 3, 2003 Fee will be \$250.00                      Make Check Payable to Florida Department of State</p> </div> <div style="width: 55%; border: 1px solid black; padding: 2px;"> <p style="font-size: 8px; margin: 0;">9. Election Campaign Financing                      Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be                      Added to Fees</p> </div> </div>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAYSON, JAMES W		NAME		
STREET ADDRESS	207 TROPIC ISLE DRIVE, #103		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33483		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JASPON, SCOTT		NAME		
STREET ADDRESS	207 TROPIC ISLE DRIVE, #103		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33483		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE SIMONE, GEORGE		NAME		
STREET ADDRESS	105 WATERVIEW WAY		STREET ADDRESS		
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUCKERMAN, CRAIG		NAME		
STREET ADDRESS	86 CIDER MILL ROAD		STREET ADDRESS		
CITY-ST-ZIP	SUDBURY, MA 01776		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: <u>James W. Layson</u>			DATE: <u>4/30/03</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		
James W. Layson			541-254-7799		

70054990



CHECK HERE IF MAKING CHANGES

CFR2034 (10/02)

attachment

7005499d

P96000038197

THE LAW FIRM OF

**GILLESPIE & ALLISON, P.A.**

SUITE 300  
1515 SOUTH FEDERAL HIGHWAY  
BOCA RATON, FLORIDA 33432

R. BOWEN GILLESPIE, III  
DONALD M. ALLISON\*  
TODD C. DROSKY†

TELEPHONE (561) 368-5758  
TELECOPIER (561) 395-0917

\*Also Admitted in Arizona & California  
†Also Admitted in Colorado & the  
District of Columbia

April 30, 2003

**VIA FEDERAL EXPRESS**

Secretary of State  
Division of Corporations  
ATTN: UBR Filing  
409 East Gaines Street  
Tallahassee, Florida 32399

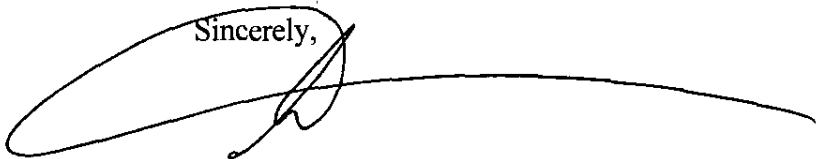
RE: Ruby, Inc. 2003 UBR

Dear Sir or Madam:

Please be advised that this office represents Ruby, Inc. Enclosed you will find for filing Ruby, Inc.'s 2003 Uniform Business Report (UBR) along with this firm's check in the amount of \$150.00, representing the filing fee for same.

I appreciate your cooperation in this matter. If you have any questions, please do not hesitate to contact me.

Sincerely,



Todd C. Drosky

TCD:/kjh

cc: Ruby, Inc.

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