FILED

1-7-02 (56) 616-8122

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # P9600041843 1. Entity Name OCEAN ATLANTIC REPORTING, INC.					Jan 16, 2002 8:00 am Secretary of State 01-16-2002 90089 019 ***150.00			
Principal Place of Business 3623 NANTUCKET COURT BOYNTON BEACH FL 33436 Mailing Address 3623 NANTUCKET COURT BOYNTON BEACH FL 33436					1 150 NOSE (178 NOVI) OVER 180	II 1810 8845 8810 8188 XI	1 1 (2011) 1	1 838 2011 1 88 1
	Place of Business	3. Mailing Address						
	30 GLEN RD. 1330 GLEN Apt. #, etc. COTTAGE				DO NOT WRITE IN THIS SPACE			
City & Stat WEST	e 0	City & State	BCH., F		FEI Number 65-06672	202		olied For Applicable
Zip 3341	- 00.11	33406	Country	5.	Certificate of Status Desire	Fee Ro	5 Additequired	
	6. Name and Address of Curren	t Registered Agent	Name		Name and Address of Ne			
HERT, JANETTE 3623 NANTUCKET COURT BOYNTON BEACH FL 33436				t Address (P.O. Box Number is Not Acceptable) (COTTAGE)				
R The above	named entity submits this statement	for the purpose of changing its req		EST registered ac	PALM BEA		<u>33</u>	ط04
SIGNATURE	Signature, typed or printed name of registered ager		gistered Agent signatur			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 I After May 1, 2002 Fee I Make Check Payable to De				1150.00 10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
11.	OFFICERS AND	D DIRECTORS	12.		DITIONS/CHANGES TO	FFICERS AND DIREC	STORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERT, JANETTE 3623 NANTUCKET COURT BOYNTON BEACH FL 33436	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES HERT 1330 WEST	DENT JANETTE GLEN RD. PALM BCH.	(COTTAGE	2)	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Cr	ange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Cr	ange	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Cł		Addition
indicated	certify that the information supplied wi I on this report or supplemental report rporation or the receiver or trustee em , or on an attachment with an address	ic true and accurate and that my c	eionatura chall ha	ve the came.	legal effect as if made und	ler oath: that I am an i	officer c	or director