2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000044157

Entity Name: HOWE'S PROCESSING SERVICE, INC.

FILED Apr 23, 2003 Secretary of State

Current Principal Place of Business:				New Principal Pla	New Principal Place of Business:	
	TILE WAY SO RSBURG, FL		US			
Current Mailing Address:				New Mailing Add	New Mailing Address:	
	TILE WAY SO RSBURG, FL		US			
FEI Number	: 59-3385437	FEI Nu	ımber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current	Registered Agent:	Name and Addres	ss of New Registered Agent:	
8413 JAC	EBASTIAN JR ARANDA AVE E, FL 3377736					
The above in the State	e named entity e of Florida.	submits	this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signa	ature of Registered Ag	ent	Date	
	mpaign Financin S AND DIREC	_	und Contribution ().	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	T (JUMPP, CAMII 2405 44TH ST SAINT PETER:	SOUTH	L 33711	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HOWE, HOWA 4657 CASTILL ST PETERSBU	E WAY SO	DUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HOWE, ORIEE 4657 CASTILL ST PETERSBL	E WAY SO	DUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD HOWE D 04/23/2003