


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

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90138 020 \*\*\*150.00

DOCUMENT # P96000048101  
1. Entity Name OVERSEAS ADVISERS INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
325 JACARANDA DR  
PLANTATION, FL  
City & State

3. Mailing Address  
Suite, Apt. #, etc.  
City & State

4. FL Number 65-0703891

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

Country USA Zip 33324 Country

**DO NOT WRITE IN THIS SPACE**

Applied For  
Not Applicable

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name ROBERT COWF  
Street Address (P.O. Box Number is Not Acceptable)  
325 JACARANDA DRIVE  
PLANTATION FLA  
City PLANTATION State FL Zip 33324

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] (NOTE: Registered Agent signature required when reinstating) 4/1/03

January - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <u>AS ROBERT COWF</u> <u>325 JACARANDA DR</u> <u>PLANTATION, FL 33324</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Date 4/1/03 Daytime Phone 954-725-4454

CR2E034B (12/02)