2002

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

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2. Principal Place of Business 3					
7088 Wood breeze Blud	Mailing Address				
Suite, Apt. #, etc.	<u>same</u>				
'	Suite, Apt. #, etc.			DO NOT WRITE IN THIS	SPACE
City & State	City & State				
Nindermere FL	Only a State			FEI Number	Applied For
Zip Country	Zip	Country		<u>59-3391744</u>	Not Applicable
34786 USA		:	5.	_Certificate of Status Desired	\$8.75 Additional
		<u> </u>	7 1	Name and Add	Fee Required
	10 miles	Name		Name and Address of Current Registered	Agent
DO NOT WRI	TF				
		Street Ad	Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE	CE				
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<u>.</u>		City		Fi	Zip Code
The above named entity submits this statement for the r	Durnoso of changing in			<u> </u>	
The above named entity submits this statement for the p	ourpose or changing its re	egistered office or	registered a	gent, or both, in the State of Florida,	
GNATURE					
Signature, typed or printed name of registered agent and title	fapolicable (NOTE) is	Count word Assessment			
		kegistered Agent signatur		reinstating) . DATE	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.	January 1 - May	y 1 Fee is \$150. Fee is \$550.00	00	40 51	
(See criteria on back)	Amended I	UBR is \$61.25		10. Election Campaign Financing Trust Fund Contribution.	\$5.00 мау Ве
	Make Check Payable	to Department	of State	Austrana Commonion.	Added to Fees
CITICERS AND DIREC	TORS			*.	
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EE ADDRESS 9088 Woodbreeze B	1v0	NAME			
.ST-ZIP Windermere, FL 34.	706	STREET ADDRESS CITY-ST-ZIP	-		
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Elera Luken		TITLE			
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et address 9088 Woodbreeze E est-zip Windermore, FL 3	178L	CITY-ST-ZIP			
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hereby certify that the information supplied with this filling indicated on this report or supplemental report is true and of the composition of the second report is true and of the composition of the second report is true.			in Sontia - 1	10.07(2)(3) []	
ndicated on this report or supplemental report is true and of the corporation or the receiver or trustee empowered the corporation of the receiver or trustee empowered the corporation of the receiver of the second supplementation of the second	accurate and that my set	gnature shall have	iii section 1° the same le	। ।। ।। ।। ।। ।। ।। ।। ।। ।। ।। ।। ।। ।	that the information
f the corporation or the receiver or trustee empowered trachment with an address with all other like empowered	d.	required by Chap	ter 607, Flori	da Statutes: and that my name appears in	Block 11 or on an
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SNATURE:	Juku-			4118107_ 417-97	1-40UC
SIGNATURE AND TYPED OR PRINTED NA	ME OF SIGNING OFFICER OR DIF	RECTOR		Date TI 5 C	<u> </u>

1Entity N		/ (/)	14363E		1		
BHIGH	IT PLEASURE RESOUR	CES, INC.					
088 WOOD	lace of Business BREEZE BLVD. IE FL 34766	Mailing Address 9088 WOODBREEZE BLV WINDERMERE FL 34786	D.				
2 Principa	I Place of Business		1831				
	DI. #, etc.	3. Mailing Address Suite, Apt. #, etc.				(B) B11(B 1161# 1781# 1	
City & St		City & State	/	7	NOT WRITE IN TH		applied For
Zip	Country	Zip	Country	4. 121 Number 59-	3391744	N	Applied For Iot Applica
<u> </u>	<u></u>	Current Registered Agent	Country	5. Certificate of Status		\$8.75 Ad Fee Require	dditional ed
	o. Name and Address of	Current Registered Agent	Name	7. Name and Address	of New Register	ed Agent	
	KEN, MATTHEW J 88 WOODBREEZE BLVD.		Street Addres	ss (P.O. Box Number is Not A	(cceptable)	 -	
	NDERMERE FL 34786		/ -	- t			
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			City		·	📘 📗 Zip Cod	1 0
The abov	ve named entity submits this state	ement for the purpose of changing it		tered agent, or both, in the S	-	Zip Coo	
The abov			s registered office or regis		State of Florida.		
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