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

## P96000078014 **DOCUMENT #**

1. Entity Name

BRITKEN INDUSTRIES, INC.



## **FILED** Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90245 008 \*\*\*150.00

LARGO FL 33771  2. Picropal Place of Business  Suite, Apt. # etc.							900 1	VE THE		,				
Sure, Apr. #, elbC  Suite, Apr	Principal Place of Business 3700 E BAY DR LARGO FL 33771				E BAY DR					L (BERNER) JFR IRNIK ENRY BERN BRAN	<b>88</b> 111 <b>88</b> 111 1 <b>88</b> 5		NJON ONEN NOTO	
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S. Certificate of Status Desired   S8.75 Additional Fee Required   S. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent   STORE BAY DR   Name and Address of New Registered Agent   7. Name and Address of New Registered Agent   STORE BAY DR   Name and Address of New Registered Agent   7. Name and Address of New Registered Agent   STORE BAY DR   Name and Address of New Registered Agent   7. Name	City & State				City & State				4. F	El Number <b>59-3406863</b>		-		
S. Name and Address of Current Registered Agent  WEISEL, HOLLY K 3700 E BAY DR  LARGO FL 33771  6. 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 agistered agent and title if agent and a computation of agisteries agent and title if agent and accept the obligations of agistered agent and title if agent and accept the obligations of agistered agent and title if agent and accept the obligations of agistered agent and title if agent and accept the obligations of agistered agent and title if agent and accept the obligations of agistered agent and title if agent and accept the obligations of agistered agent and title if agent agent and title if agent agent and title if agent ag	Zip	Country Zip				Country			5. (	Certificate of Status Desired		<b>8.75</b> Ad	ditional	
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tridicated 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 the empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-536-5787