

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P96000080275**
 1. Entity Name
Christian Art Enterprise, Inc.

APPROVED
AND
FILED

01 APR 27 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
Christian Art Enterprise, Inc.
2323 Ena Bob Street
Lanark Village, Fla. 32323

2. Principal Place of Business 3. Mailing Address
2323 Ena Bob Street **P.O. Box 1336**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
Lanark Village, Fl. **Cornabelle, Fla.**
 Zip Country Zip Country
32323 **Franklin** **32322** **Franklin**

4. FEI Number Applied For
59-3415981 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

William E. Pepe
2323 Ena Bob St
Lanark Village, Fla 32323

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) 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 IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** NAME **Lil Mc Dowell** ☐ Delete
 STREET ADDRESS **105 Rosewood Dr.**
 CITY-ST-ZIP **Palm Harbor, Fla. 34685**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V-P** NAME **William R. Louis** ☐ Delete
 STREET ADDRESS **P.O. Box 1336**
 CITY-ST-ZIP **Cornabelle, Fla. 32322**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D.S.** NAME **William E. Pepe** ☐ Delete
 STREET ADDRESS **P.O. Box 1336**
 CITY-ST-ZIP **Cornabelle, Fla. 32322**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **William E. Pepe** April 27, 2001 866-724-0099
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)