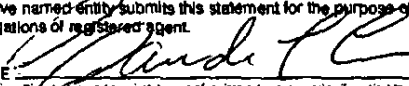
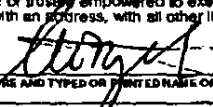


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

03 JUN -9 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
90138392

DOCUMENT # P96000102448					
1. Entity Name AFY ENTERPRISES, INC.					
Principal Place of Business 1345 MAIN STREET SARASOTA, FL 34236 US			Mailing Address 3203 LITTLE COUNTY RD PARRISH, FL 34219 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0714862	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YEARICK, ALLEN F 3203 LITTLE COUNTRY RD. PARRISH, FL 34219			7. Name and Address of New Registered Agent Name C. Ted French Street Address (P.O. Box Number is Not Acceptable) 2033 Main Street Suite 304 City Sarasota FL 34237		
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  DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent Signature required when substituting)					
FILE NOW! FEE: \$150.00 After May 1, 2003, fee will be \$550.00. 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YEARICK, ALLEN F 3203 LITTLE COUNTRY ROAD PARRISH, FL 34219	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  DATE _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CFR2034 (10/02)

7/6/9

Attachment

90138392

P96000102448

Kathy,

Just a note to remind you of our conversation on May 28, 2003 regarding AFY Enterprises, Inc. You instructed me to forward the 2003 Annual Report and a check in the amount of \$150.00 to bring the corporation up to date.

Thank you for all of your help!

Jill Ruth