2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000027816 **DOCUMENT #**

1. Entity Name



FILED Feb 07, 2003 8:00 am Secretary of State

PRISCILL	.A, INC.						02-07-2003 30073 043 130.	<i>5</i> 0	
Principal Pla 8300 BISCAY MIAMI FL 33		s	8300 BISCA	Mailing Address 8300 BISCAYNE BLVD. MIAMI FL 33138					
2. Principal	Place of Busin	ness	3. Mailing Ad	ddraee					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J. Maining Ac	- Alling House					
Suite, Apt			Suite, Apt.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & Sta	ete	••	City & Stati	City & State			hh-1/4/324/	ied For Applicable	
Zip	j	Country	Zip		Coun	try	5. Certificate of Status Desired	onal	
f.,	6. Name	and Address of Cu	rrent Registered Age	Registered Agent			7. Name and Address of New Registered Agent		
-				··· <u>·</u>	· · · · · ·	Name	7. Name and Address of New Registered Agent		
BAILEY; \	WILLIAM D	JR.				Street Address (P.O. Box Number is Not Acceptable)			
•	CAYNE BLV	D.				Street Address (F.O. Box Number is Not Acceptable)			
MIAMI FL	. 33138			•					
. .		•				City	FL Zip Code		
8. The above the obligat	e named entity tions of regist	submits this statemered agent.	ent for the purpose of	changing its	registere	ed office or registe	tered agent, or both, in the State of Florida. I am familiar with, an	d accept	
SIGNATURE		or printed name of registerer	agent and title if applicable.	(NOTE	- Pagietoro	d Agent signature require		\	
				(10)	. nogiatorec		red when reinstating) DATE		
Afte	r May 1, 200	! FEE IS \$150.00 3 Fee will be \$550 Florida Departme	3.00				9. Election Campaign Financing \$5.00 Trust Fund Contribution.	May Be Fees	
10.	<u>. </u>	OFFICERS	AND DIRECTORS		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	J 11	
TITLE	D	· · · · · · · · · · · · · · · · · · ·		Delete	TITLE			Addition	
NAME	BAILEY, W	ILLIAM D JR.			NAME	:	_ ,	_	
STREET ADDRESS CITY-ST-ZIP	8300 BISC MIAMI FL :	AYNE BLVD.				T ADDRESS		ĺ	
TITLE :	MANUAL I E	30100		Delete	1	ST-ZIP			
NAME			L	Delete	TITLE		Change [Addition	
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CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·				CITY-	ST-ZIP			
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TITLE		·		Delete	TITLE		☐ Change	7 Addition	
NAME				Delete	NAME	[Change	Addition	
STREET ADDRESS					STREE	T ADDRESS]	
CITY-ST-ZIP					CITY-5	ST-ZIP	•		
TITLE NAME	_			Delete	TITLE		Change	Addition	
STREET ADDRESS	1. 27	Salar Salar		y	NAME STREET	ADDRESS -	· Andrew		

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 oftrustee export ered to execute this apprt 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 employered.

SIGNATURE: